



State of Rhode Island and Providence Plantations
Office of the Secretary of State

Fee: \$20.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Non-Profit Corporation
Annual Report

Filing Period: June 1 - June 30

In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2016

1. Corporate ID No. 000314212

2. Name of Corporation Rhode Island Birth Network, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 182 ROCHAMBEAU AVENUE

City or Town: PROVIDENCE

State: RI Zip: 02906 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

WORK TO PROMOTE INFORMED DECISION MAKING BY CONSUMERS OF
PREGNANCY, BIRTH, AND PARENTING SERVICES

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	MERAV MINKIN	182 ROCAMBEAU AVENUE PROVIDENCE, RI 02906 USA
TREASURER	KAELI SUTTON	110 WENTWORTH AVE CRANSTON, RI 02905 USA

SECRETARY	LISA GENDRON	169 BARTLETT AVE PROVIDENCE, RI 02905 USA
VICE PRESIDENT	ALANA BIBEAU	184 ROCHAMBEAU AVE PROVIDENCE, RI 02906 USA
DIRECTOR	DAREN BULLEY	450 ELMGROVE AVE PROVIDENCE, RI 02906 USA
DIRECTOR	SUSIE FINNERTY	206 SMITH ST PROVIDENCE, RI 02908 USA
DIRECTOR	JACQUELINE PROCOPIO	191 LAKEDELL DR WARWICK, RI 02818

8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

MERAV MINKIN 182 ROCHAMBEAU AVENUE PROVIDENCE , RI 02906

9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.

Signed this 17 Day of July, 2016 at 8:08:40 PM by the authorized person. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.

By MERAV MINKIN
Signature of Authorized Person

Form No. 631
Revised 09/07

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