



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

Fee: \$50.00

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

Limited Liability Company
Annual Report

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2016

1. ID No. 000539865

2. Exact Name of the Limited Liability Company Affinity Physicians, LLC

3. State of Formation

State: RI

ARTICLE III

Using the following NAICS codes, please select the code that best describes your business.

NAICS Code 62

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

PHYSICIAN MEDICAL GROUP

5. Principal Office Address

No. and Street: 455 TOLL GATE ROAD

City or Town: WARWICK

State: RI

Zip: 02886

Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: JAMES FANALE Contact Title: CHIEF CLINICAL OFFICER

No. and Street: 455 TOLL GATE ROAD

City or Town: WARWICK

State: RI

Zip: 02886

Country: USA

7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.
DO NOT LIST MEMBERS

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	JEFFREY BORKAN (EX OFFICIO W/ VOTE)	46 MASSAPOAG AVENUE SHARON, MA 02067 USA
MANAGER	KATHLEEN BOWLING	107 SQUANTUM DRIVE

		WARWICK, RI 02888 USA
MANAGER	JOSEPH DIAZ	27 WEYMOUTH STREET PROVIDENCE, RI 02906 USA
MANAGER	CHRISTIE L. DIBBLE	11 JODIE BETH DRIVE EAST GREENWICH, RI 02818 USA
MANAGER	PAUL DISILVESTRO	62 HOPKINS HILL ROAD EXETER, RI 02822 USA
MANAGER	JAMES FANALE (EX OFFICIO W/ VOTE)	220 SEWALL STREET BOYLSTON, MA 01505 USA
MANAGER	ANA TUYA FULTON	7 COLD SPRING ROAD BARRINGTON, RI 02806 USA
MANAGER	JOHN GELZHISER	65 DEERFIELD DRIVE EAST GREENWICH, RI 02818 USA
MANAGER	JEANNINE GIOVANNI	14 HARVEST ROAD REHOBOTH, MA 02769 USA
MANAGER	DUANE GOLOMB	229 OLD PLAINFIELD PIKE FOSTER, RI 02825 USA
MANAGER	GUY LANCELOTTI	40 NEWTON AVENUE NARRAGANSETT, RI 02882 USA
MANAGER	KATHERINE MCCLEARY	408 LLOYD AVENUE PROVIDENCE, RI 02906 USA
MANAGER	JAMES PADBURY	85 COLE AVENUE PROVIDENCE, RI 02906 USA
MANAGER	MAUREEN PHIPPS (EX OFFICIO W/ VOTE)	5 SUMMER STREET WRENTHAM, MA 02093 USA
MANAGER	RAYMOND POWRIE (EX OFFICIO W/ VOTE)	244 HEATH STREET CHESTNUT HILL, MA 02467 USA
MANAGER	JAMES SULLIVAN	10 EXCHANGE COURT, UNIT 402 PAWTUCKET, RI 02860 USA
MANAGER	GHULAM SURTI	4 ALYSSA LANE LINCOLN, RI 02865 USA
MANAGER	AUDREY TYRKA	9 ALFRED DROWNE ROAD BARRINGTON, RI 02806 USA
MANAGER	ROXANNE VREES	5 E. BUTTERFLY WAY LINCOLN, RI 02865 USA
MANAGER	JOSEPH IANNONI (EX OFFICIO W/ VOTE)	24 BERKELY DRIVE WALPOLE, MA 02081 USA

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

RUTH WOOD 455 TOLL GATE ROAD WARWICK , RI 02886

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 26 Day of October, 2016 at 10:41:53 AM 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 § 7-16.

By JAMES FANALE
Signature of Authorized Person

Form No. 632
Revised 09/07

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