

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

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: 2017

- **1. Corporate ID No.** 000027471
- 2. Name of Corporation <u>KENT COUNTY VISITING NURSE ASSOCIATION</u>
- 3. State of Incorporation

State: RI

ARTICLE III

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification click here.

NAICS Code

6

Fee: \$20.00

624190

4. Corporate Address in Rhode Island

No. and Street: 51 HEALTH LANE

City or Town: $\underline{WARWICK}$ State: RI Zip: $\underline{02886}$ 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

SKILLED IN HOME HEALTH 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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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.

| Title | Individual Name | Address |
|---------------------|-----------------------------|---------------------------------------------------------|
| | First, Middle, Last, Suffix | Address, City or Town, State, Zip Code, Country |
| TREASURER | DOUGLAS JACOBS | 1141 NORTH MAIN ROAD JAMESTOWN, RI 02835 USA |
| SECRETARY | JAMES BOTVIN | 12 BAGY WRINKLE COVE WARREN, RI 02885 USA |
| VICE-CHAIRPERSON | GARY E. FURTADO | 15 BETH AVENUE WARREN, RI 02885 USA |
| VICE-CHAIRPERSON | MARIBETH WILLIAMSON | 450 WAKEFIELD STREET WEST WARWICK, RI 02893 USA |
| ASSISTANT SECRETARY | ALYSSA BOSS | 45 WILLARD AVENUE PROVIDENCE, RI 02905 USA |
| CHAIRPERSON | CHARLES R. REPPUCCI | 50 KENNEDY PLAZA, STE. 1500 PROVIDENCE, RI 02903 USA |
| EXECUTIVE DIRECTOR | KATHLEEN PEIRCE | 51 HEALTH LANE WARWICK, RI 02886 USA |
| ASSISTANT TREASURER | JOSEPH IANNONI | 45 WILLARD AVENUE PROVIDENCE, RI 02905 USA |
| DIRECTOR | GEORGE W. SHUSTER | 44 ROBIN VALE DRIVE NORTH SCITUATE, RI 02857 USA |
| DIRECTOR | ALLEN CICCHITELLI | 46 SEAVIEW AVENUE JAMESTOWN, RI 02835 USA |
| DIRECTOR | JOHN R. GALVIN | 82 JEFFREY DRIVE NORTH ATTLEBORO, MA 02760 USA |
| DIRECTOR | CYNTHIA B. PATTERSON | 33 KEENE STREET PROVIDENCE, RI 02906 USA |
| DIRECTOR | MARIBETH WILLIAMSON | 450 WAKEFIELD STREET WEST WARWICK, RI 02893 USA |
| DIRECTOR | DIANE LIPSCOMBE, PHD | 6 WATSON AVENUE BARRINGTON, RI 02806 USA |
| DIRECTOR | WILLIAM M. KAPOS | 401 OCEAN ROAD NARRAGANSETT, RI 02882 USA |
| DIRECTOR | SHARON CONARD- WELLS | 85 MAJESTIC AVENUE WARWICK, RI 02888 USA |
| DIRECTOR | KENT W. GLADDING | 10 JAY COURT CRANSTON, RI 02921 USA |
| DIRECTOR | JAMES BOTVIN | 12 BAGY WRINKLE COVE WARREN, RI 02885 USA |
| DIRECTOR | CHARLES R. REPPUCCI | 50 KENNEDY PLAZA, STE. 1500 PROVIDENCE, RI 02903 USA |
| DIRECTOR | GARY E. FURTADO | 15 BETH AVENUE WARREN, RI 02885 USA |
| DIRECTOR | DENNIS D. KEEFE | 45 WILLARD AVENUE PROVIDENCE, RI 02905 USA |
| DIRECTOR | PATRICK J. MURRAY, JR. | 255 BOXWOOD LANE BRIDGEWATER, MA 02324 USA |
| DIRECTOR | JASON B. BOUDJOUK, MD | 1 ASHLEY DRIVE LINCOLN, RI 02865 USA |
| DIRECTOR | JOSEPH J. MCGAIR, ESQ. | 92 SANDY LANE WARWICK, RI 02889 USA |
| DIRECTOR | MARIO BUENO | 98 FLETCHER AVENUE CRANSTON, RI 02920 USA |

| DIRECTOR | LOUIS MARINO, JR., MD | 83 STATE STREET BRISTOL, RI 02809 USA |
|----------|---------------------------|-------------------------------------------------|
| DIRECTOR | ROBERT G. FLANDERS, JR. | 45 BOW STREET EAST GREENWICH, RI 02818 USA |
| DIRECTOR | LISA BOYLE, MD | 199 ANGELL ROAD LINCOLN, RI 02865 USA |
| DIRECTOR | ESTHER EMARD, RN, MSN, MS | 667 ROUTE 100 STOCKBRIDGE, VT 05772 USA |
| DIRECTOR | EMILY HARRISON, MD | 15 ORIOLE STREET RUMFORD, RI 02916 USA |
| DIRECTOR | DOUGLAS JACOBS | 1141 NORTH MAIN ROAD JAMESTOWN, RI 02835 USA |

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

KATHLEEN PEIRCE 51 HEALTH LANE WARWICK, RI 02886

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

Signed this 18 Day of May, 2017 at 3:37:55 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 JAMES BOTVIN, SECRETARY

Signature of Authorized Person

Form No. 631 Revised 09/07

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