



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: **2017**

Non-Profit Corporation

→ Filing period: June 1 - June 30

→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by July 30.

| | | | | | |
|---|-----------------|--|---|--------------------------|------------------|
| 1. Entity ID Number 34645 | | 2. Exact name of the Corporation National Perinatal Information Center, Inc | | | |
| 3. State of Incorporation Rhode Island | | 5. Brief description of the character of business conducted in Rhode Island Research and Education | | | |
| 4. NAICS Code 813920 - Professional Org <input checked="" type="checkbox"/> | | | | | |
| 6. Principal Office Address 225 Chapman St, Suite 200 | | City Providence | State RI | Zip 02905 | |
| 7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/> | | | | | |
| President Name Janet H. Muri | | | Vice-President Name none | | |
| Street Address 225 Chapman St, Suite 200 | | | Street Address | | |
| City Providence | State RI | Zip 02905 | City | State | Zip |
| Secretary Name DeWayne Pursley, MD, MPH | | | Treasurer Name Mary Henrikson, MN, BSN, CENP | | |
| Street Address 330 Brookline Avenue, Rose 3 | | | Street Address 2979 N St. Augustine Pl | | |
| City Boston | State MA | Zip 02215 | City Tucson | State AZ | Zip 85712 |
| 8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input checked="" type="checkbox"/> | | | | | |
| Director Name Larry Veltman, MS, DFASHRM, FACOG | | | Director Name Raymond Cox, MD, MBA | | |
| Street Address 7535 SW Farmoor Street | | | Street Address 15 Northridge Drive | | |
| City Portland | State OR | Zip 97225 | City Hilton Head | State SC | Zip 29926 |
| Director Name Ann D. Gaffey, RN, MSN, CPHRM, DFASHRM | | | Director Name Marilyn Escobedo, MD | | |
| Street Address 1724 N. Huntington Street | | | Street Address 1200 Everett Drive, 7th Floor North Pavillion | | |
| City Arlington | State VA | Zip 22205 | City Oklahoma City | State OK | Zip 73104 |
| 9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641. | | | | | |
| Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct. | | | | | |
| <i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i> | | | | | |
| Name of Officer/Authorized Representative Janet H. Muri | | | | Date 6/14/2017 | |
| Signature of Officer/Authorized Representative | | | | | |

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MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

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BY
FORM 631 - Revised: 05/2017

8. List ALL Directors (Name and Address) Cont.

Dennis English, MD, MMM, FACOG
2359 Railroad St., Apt 2423
Pittsburgh, PA 15222

Emory Fry, MD
11722 Sorrento Valley Road, Suite G-
2 San Diego, CA 92121

Martin McCaffrey, MD
101 Manning Drive, CB# 7596
Chapel Hill, NC 27599

Ana Lopez-Defede, PhD, MEd, MA
1600 Hampton Street
Columbia, SC 29208

Larry Smith, JD
10980 Grantchester Way
Columbia MD 21044

Hyagriv N. Simhan, MD, MS
300 Halket Street
Pittsburgh, PA 15213

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