



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.

2017 JUN 21 AM 9:59  
 R.I. DEPT. OF STATE  
 BUS. SERVICES DIV.

1. Entity ID Number <b>142042</b>	2. Exact name of the Corporation <b>Scituate Health Alliance</b>
3. State of Incorporation <b>RI</b>	5. Brief description of the character of business conducted in Rhode Island <b>Fundraising to provide primary health and dental care for residents of Scituate, RI.</b>
4. NAICS Code	

6. Principal Office Address <b>35 Village Plaza Way</b>	City <b>N. Scituate</b>	State <b>RI</b>	Zip <b>02857</b>
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7. List ALL officers (names and addresses) Check the box to indicate an attachment

President Name <b>John Marchant</b>			Vice-President Name <b>Michael Fine, MD</b>		
Street Address <b>1155 Chopmist Hill Rd</b>			Street Address <b>348 Gleaner Chapel Rd.</b>		
City <b>N. Scituate</b>	State <b>RI</b>	Zip <b>02857</b>	City <b>N. Scituate</b>	State <b>RI</b>	Zip <b>02857</b>
Secretary Name <b>Skye Peachie</b>			Treasurer Name <b>Wendy B. Marchant</b>		
Street Address <b>Central Ave</b>			Street Address <b>1155 Chopmist Hill Rd.</b>		
City <b>N. Scituate</b>	State <b>RI</b>	Zip <b>02857</b>	City <b>N. Scituate</b>	State <b>RI</b>	Zip <b>02857</b>

8. List ALL directors (names and addresses). RI Corporations **MUST** list at least **THREE** directors. Check the box to indicate an attachment

Director Name <b>John Marchant</b>			Director Name <b>Michael Fine, MD</b>		
Street Address <b>1155 Chopmist Hill Rd.</b>			Street Address <b>348 Gleaner Chzpel Rd.</b>		
City <b>N. Scituate</b>	State <b>RI</b>	Zip <b>02857</b>	City <b>N. Scituate</b>	State <b>RI</b>	Zip <b>02857</b>
Director Name <b>Skye Peachie</b>			Director Name <b>Wendy B. Marchant</b>		
Street Address <b>Central Ave.</b>			Street Address <b>1155 Chopmist Hill Rd.</b>		
City <b>N. Scituate</b>	State <b>RI</b>	Zip <b>02857</b>	City <b>N. Scituate</b>	State <b>RI</b>	Zip <b>02857</b>

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.**

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

Name of Officer/Authorized Representative <b>John Marchant / President</b>	Date <b>6/19/17</b>
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Signature of Officer/Authorized Representative <b>John Marchant / President</b>	<b>FILED</b>
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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

**JUN 21 2017**  
 BY 435

*Seituate*  
**HEALTH**  
ALLIANCE

Additional Board member and Officer

Lynn Blanchette  
5 Talon Court  
Hope, RI 02831