

Office of the Secretary of State

Matthew A. Brown, Secretary of State

Filing Period: June 1 - June 30 • Filing Fee: \$20.00

100 North Main Street Providence, RI 02903-1335 401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

2005

(FORM MUST BE TYPED OR P.							
1. Corporate ID No	2. Name of Corporation			• •			
48308		Women's Association			· •		
3. State of Incorporation	4. Corporate address to	Rhode Island - Street Addre	22	City	ZΦ		
RHODE ISLAND	235 Promena	de Street, Sui	te 500	Providence	02908		
5. Foreign corporation. Enter p	rincipal office address		City	State	Zip		
6. Brief Description of the charact NONPROFIT ORGANIZA		•	Island				
President Name	es of the officer dlecki, MD	S: ("X" BOX FOR AYTAC	CHMENT) TFILL IN SPACES Vice President Name	BEFORE USING ATTA	CHMENTS		
Sinvi Addrisi 235 Prome	nade Street, S	uite 500	Street Address				
City	State	Zip	City	State	Zip		
Providence	RI	02908					
Secretary: Name	 		Treasurer Name				
				Harrop, MD			
Sircet Address			Street Address 235 Promenade Street, Suite 500				
Clip-	State	Zip	City Providence	State RI	7.tp 02908		
8. NAMES AND ADDRESS	ES OF THE DIRECTO	ORS: ("X" BOX FOR AIT	ACHMENT) TILL IN SPACES	BEFORE USING ATTA	CHMENTS		
THE NUMBER OF DIRECT Director Name	TORS OF A DOMEST	TIC (RHODE ISLAND)	CORPORATION SHALL NO. Director Name	T BE LESS THAN THR	EE (3). R.I.G.L. 7-6		
Frances P. Con	klin. MD ~		Elaine F	ain, MD			
Sirect Address 235 Promenade	,	500	Sircei Address 235 Promenade Street, Suite 500				
City Providence	State RI	^{2(p} 02908	City Providence	State RI	^{2ip} 02908		
Director Name Marlene Cutita	r, MD		Director Name Barbara Roberts, MD				
Street Address 235 Promenade	Street, Suite	500	Sirce Address 235 Promenade Street, Suite 500				
Ony Providence	State RI	<i>Σφ</i> 02908	Gity Providence	State RI	<i>Σιρ</i> 02908		
9. REGISTERED AGENT I	N RHODE ISLAND -	DO NOT ALTER - Cha	inges require filing of Form	641 - R.I.G.L. 7-6-13	/ 7-6-78		
Agent Name							
Agent Name SARAH STEVENS			City	2in			
Agent Name	SUITE 500		City PROVIDENCE	Zip 02	2908-		

Under penalty of perjury, I or	declare	and aff	im	that I	i have o	examine	ed thi
report, including any accomp	ayrying	schedul	es a	and sta	atemeni	is, and,i	hat o
statements contained herein a	re trug	and cor	rect	1		i /	
melal	1 6	Der	1	Y	7	11/1	<
1Pr-CX OUC	$\mathcal{L}\mathcal{L}$	7	¥.Z	1	_4	v/Q	<u> </u>
Signature of Officer	- /	•	ν,	1	- 1	Date	

Pamela Harrop, MD

Print or Type Name of Officer

Treasurer

Title of Officer



SARAH STEVENS

235 PROMENADE STREET, SUITE 500

Address

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Matthew A. Brown, Secretary of State

Providence, RI 02903-1335 401.222.3010

MON-PROFIL (CORP	UK	ATION	AININUA	L KEPUKI	ruk	IHE	ILAK	 <u> 2004 </u>
iling Period: June 1 - 1	Iune 30	•	Filine Fee:	\$20.00					

(FORM MUST BE TYPED OR PRINTED IN BIACK)				
1. Corporate ID No.	2. Name of Corporation			
48308	Rhode Island Medical Women's Association			
		,		

3. State of Incorporation 4. Corporate address in Rhode Island - Street Address City Zip Providence 235 Promenade Street, Suite 500 **RHODE ISLAND** 02908 5. Foreign corporation. Enter principal office address ZIP . . 6. Brief Description of the character of the affairs which are actually conducted in Rhode Island NONPROFIT ORGANIZATION FOR WOMEN PHYSICIANS. 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) | FILL IN SPACES BEFORE USING ATTACHMENTS President Name Vice President Name Diane Siedlecki, MD Street Address Sircet Address 235 Promenade Street, Suite 500 Providence. State City Z.lp RΙ 02908 Treasurer Name Pamela Harrop, MD Secretary Name Bonnie Reibman, MD 235 Promenade Street, Suite 500 Sircei Address 235 Promenade Street, Suite 500 Chy State City State 7.ip Providence RI 02908 Providence | KI | UZ

8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Providence 02908 THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23 Director Name Director Name Frances P. Conklin, MD Elaine Fain, MD Street Address 235 Promenade Street, Suite 500 235 Promenade Street, Suite 500 State ... City State Providence 02908 Providence RI 02908 Director Name Jocelyn LaHaye, MD Street Address Street Address 235 Promenade Street, Suite 500 State State Providence 02908 RI 9. REGISTERED AGENT IN RHODE ISLAND DO NOT ALTER Changes require filing of form 641 - R.I.G.L. 7-6-13 / 7-6-78 Agent Name Address

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

City

PROVIDENCE

* 4 8 3 0 8 *	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all
File Date FILED	statements contained herein are true any correct.
Check No	Signature of Officer Pamela Harrop, MD
FOR SECRETARY OF STATE USE ONLY	Print or Type Name of Officer Treasurer Title of Officer

02908-



FOR SECRETARY OF STATE USE ONLY

Matthew A. Brown, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003 Filing Period: June 1 - June 30 Filing Fee: \$20.00

FORM MUST BE TYPED OR P	RINTED IN BLACK							
1. Corporate ID No.	2. Name of Corporation							
48308	Rhode Islan	id Medical Wome	en's Association					
3. State of Incorporation	1	In Rhode Island -Street Add		City	Žip .			
Rhode Island	235 Promena	de Street, Sui	te 500	Providence	02908			
3. Foreign corporation: Enter pr	incipal office address		City	State	Zip			
				<u> </u>				
6. Brief Description of the charac	ter of the affairs which	are actually conducted in R	hode Island					
N								
Nonprofit corpor								
7.NAMES AND ADDRESS	ES OF THE OFFIC	PRS (FXFROX FOR AT	ACHMENT, LIFTLE IN SPACE	ES BEFORE USINGATTA	CLIMENTS			
President Name Barbara Roberts,	MD		Vice President Name	MD.				
Street Address	1110		Laurie Reeder	, MU				
235 Promenade St	reet Suite	500	•	Camana Cudas	F00			
City	State			Street, Suite				
Providence	RI	2 <i>ip</i> 02908	Ciry Providence	State	Zip			
Secrétary Name	1	1. 02300	Treasurer Name	. l RI	.] 02908			
Bonnie Reibman,	Mī		Pamela Harrop	. MD				
Street Address	· · · · · · · · · · · · · · · · · · ·	<u> </u>	* Street Address	,				
235 Promenade St	reet, Suite	500		Street, Suite	500			
City	State	Zip	*City	State	Zip			
Providence	RI	02908	Providence	RI	02908			
	es obtine direc	NOTES CATEROX POR A	TTACHMENT) TERM IN SPA	CES BEFORE USING AT	TAC TOMENTS			
THE NUMBER OF D	RECTORS OF A DOA	IESTIC (RHODE (ISLAN	D) CORPORATION SHALL NO	T BE LESS THAN THREE	(3).R.L.G.L.(7.6-23)			
Director Name			Director Name					
Frances P. Conk	lin MD		Elaine Fai	la Mn				
Street Address			Street Address	iii, rii)				
235 Promenade S	treet. Suite	500	•	235 Promenade Street, Suite 500				
City '	State	Zip	· City State Zip					
•	i	'	Providence		*			
Providence Director Name	J., RI	.lQ2908	Director Name	lRI	.] 029 08			
Nancy Littell,	MD		* Director Name					
Street Address		 	· Street Address					
235 Promenade S	treet. Suite	500	·					
City	State	Zip	.City	State	Zip			
Providence	RI	02908	•) .			
9/REGISTERED AGENTA	N RHODELSLAND	SOO NOT ALTER Cha	nges require filling of F		1526.78			
Ageni Name			Address					
Sarah Stevens								
Address			City	17/0				
106 Francis Str	eet		Providence.	Ζiρ	02903			
					02703			
This report must be signe	d in ink by either	the President, Vice Pi	resident, Secretary, Assista	int Secretary, Treasure	r, Receiver or Trustee			
	•	•	•	•				
					_			
			Under penalty of perju	ry, I doclare and affirm tha	t I have examined			
<u> </u>				ny accompanying scheduk				
1 11		7	and that all statements	contained herein are true a	and correct.			
Ed D.	O O 0000	į	(// //	2. 0. Lat	-√/ //			
File Date SEP	८ ८ ८००५ —	1	Synce	es 17/1	1///			
Check No. 20 M		\	Signature of Officer	V V Vai	לות //			
2/11/	ଡ଼ଡ଼ଡ଼ଡ଼	MP-	Pamela Haçı	700000000000000000000000000000000000000	136 //			
1_			Print or Type Name of Og	floor: 11				

Treasurer

Title of Officer

"E SEINED

Form 631 Rev. 6/02

To be filed annually during the month of June



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

Corporate ID Number DNP-4	8308	Annual Report for the year 2002
I. The name of the corporation	on is Rhode Islan	nd Medical Women's Association
. The state or other jurisdict	ion under the laws	of which it is incorporated is RHODE ISLAND
3. The address of the registe	ered office of the c	orporation in this state is 106 FRANCIS STREET PROVIDENCE, RI
02903		
and the name of its regist	ered agent in this	state at that address is EDWINA L. REGO
		ily conducting in Rhode Island, briefly stated, is Nonprofit ans in RI - networking and educational offerings
If a foreign corporation, the incorporated is N/A	e address of its pr	incipal office in the state or other jurisdiction under the laws of which it is
• ————	de Island 1	06 Francis Street, Providence, RI 02903
		fficers: (In compliance with 7-6-23 of the R.I.G.L. 1956, as amended, the sland) corporation shall not be less than three (3).)
NAME	OFFICE	ADDRESS
Nancy Littell, MD	Director	106 Francis Street, Providence, RI 02903
Elaine Fain, MD	Director	n
Bonnie Reibman, MD	— Director	11
Marlene Cutitar, MD	— President	11
	 Vice-President	
	Secretary	
Pamela Harrop, MD	Treasurer	et).
Dated: 6/21/02		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.
		Rhode Island Medical Women's Association
	* 79. 1 ° - 1 1	Exact Name of Corporation
FOR SECRETA STEED	EONLY	Ву
le Date: JUN 2 4 2006	2 — 3183 (55. 1	Title President (Report nust be signed by an officer)
heck No.: By ON S	<u> </u>	Form No. 631 Revised 5/98
y: - 		1

RIMWA BOARD OF DIRECTORS

Marlene Cutitar, MD

Pamela A. Harrop, MD

Elise Coletta, MD

Frances P. Conklin, MD

Debra Abeshaus

Elaine Fain, MD

Nancy Littell, MD

Kelly McGarry, MD

Bonnie Reibman, MD

Lucille Lanna, MD

Barbara Roberts, MD

To be filed annually during the month of June



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

Co	rporate ID Number <u>DNP-48</u>	308	Annual Report for the year 2001
1.	The name of the corporation	is Rhode Islan	d Medical Women's Association
2.	The state or other jurisdictio	n under the laws	of which it is incorporated is RHODE ISLAND
3.	The address of the register	ed office of the co	orporation in this state is 106 FRANCIS STREET PROVIDENCE, RI
	and the name of its register	ed agent in this s	tate at that address is EDWINAL.REGO
4.	organization for	women phy	ly conducting in Rhode Island, briefly stated, is Nonprofit sicians in Rhode Island - networking and educ
5	If a foreign corporation, the incorporated isN/		tional offerings ncipal offerings ncipal office in the state or other jurisdiction under the laws of which it is
5.	Corporate address in Rhod	106	Francis Street, Providence, RI 02903
7.	Names and addresses of its number of directors of a doc	s directors and of mestic (Rhode Is	ficers: (In compliance with 7-6-23 of the R.I.G.L. 1956, as amended, the land) corporation shall not be less than three (3).)
	NAME	OFFICE	ADDRESS
<u>Na</u>	ncy Littell, MD	_Director	106 Francis Street, Providence, RI 02903
υياً	cille Martino, MD	_Director	"
<u>30</u>	nnie Reibman, MD	_Director	17
<u>Ma</u>	rlene Cutitar, MD	_President	106 Francis Street, Providence, RI 02903
		_Vice-President	
		_Secretary	
Рa	amela Harrop, MD	Treasurer	106 Francis Street, Providence, RI 02903
Da	ted: 10/28/2001		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.
	* 4 8 3 0 8 *		Rhode Island Medical Women's Association Exact Name of Corporation
	FOR SECRETARY OF STATE USE C Date:		Title President
he	ck No.: 1090	_	(Report must be signed by an officer) Form No. 631 Revised 5/98



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

Corporate ID Number <u>DNP-48308</u>	Annual Report for the year 2000
1. The name of the corporation is Rhod	e Island Medical Women's Association
2. The state or other jurisdiction under the	e laws of which it is incorporated is RHODE ISLAND
3. The address of the registered office of	f the corporation in this state is106 FRANCIS ST. PROVIDENCE, RI 02903
and the name of its registered agent i	n this state at that address is EDWINA L. REGO
4. The character of the affairs which it is zation for woman physic	actually conducting in Rhode Island, briefly stated, is Nonprofit organicians.
5 If a foreign corporation, the address of incorporated is	f its principal office in the state or other jurisdiction under the laws of which it is
	106 Francis Street, Providence, RI 02903
	and officers: (In compliance with 7-6-23 of the R.I.G.L. 1956, as amended, the node Island) corporation shall not be less than three (3).)
NAME OFFICE	ADDRESS
Nancy Littell, MD Director	106 Francis Street, Providence, RI 02903
Kathleen Fitzgeraldbirdh	106 Francis Street, Providence, RI 02903
Frances Conklin, MD Director	106 Francis Street, Providence, RI 02903
Marlene Cutitar, MD Presiden	
Jane Loitman, MD Secretar	100 Parasia Charach Providence PI 02903
Pamela Harrop, MD Treasure	loc Providence RT 02903
Dated: June 8, 2000	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.
* 4 8 3 0 8 *	Rhode Island Medical Women's Association Exact Name of Gorporation
FOR SECRETARY OF STATE USE ONLY	By (Samulae a Harry
File Date: 7/6	Title Treasurer
Check No.:	(Report must be signed by an officer)
Ву:	Form No. 631 Revised 5/98



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

Corporate	e ID Number <u>ND-4830</u>	8	Annual Report for the year 1999
1. The r	name of the corporation	n is <u>Rhode Islar</u>	nd Medical Women's Association
	address of the register		of which it is incorporated is Rhode Island corporation in this state is 106 FRANCIS STREET PROVIDENCE, RI
and	the name of its register	red agent in this	state at that address is EDWINA L. REGO
4. The 6	character of the affairs	which it is actua Lans promot	Ily conducting in Rhode Island, briefly stated, is organization in gg education
incor	poreted is N/A		incipal office in the state or other jurisdiction under the laws of which it is
6. Corp	orate address in Rhode	s Island 106 B	Francis Street, Providence, RI 02903
			fficers: (In compliance with 7-6-23 of the R.I.G.L. 1956, as amended, the land) corporation shall not be less than three (3).)
P	NAME	OFFICE	ADDRESS
	Coletta, MD es Conklin, MD	_Director _Director	106 Francis Street, Providence, RI 02903 106 Francis Street, Providence, RI 02903
Betty	Mathieu, MD	Director	106 Francis Street, Providence, RI 02903 166 Francis Street, Providence, RI 02903
	ne Cutitar, MD rine Buki, MD	President Vice-President	106 Francis Street, Providence, RI 02903
Jane	Loitman, MD a Harrop, MD	Secretary Treasurer	106 Francis Street, Providence, RI 02903 106 Francis Street, Providence, RI 02903
Dated:			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. Rhode Island Medical Women's Association
FOR SI	ECRETARY OF STATE USE C	ONLY -	By
Check No.	:10_26	_	(Report must be signed by an officer)
Ву:	<u>C</u> M	_	Form No. NP-13 Revised 5/98



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

Corpo	orate ID Number ND-483	08	-	Annual Report for the year 1998
1. Tł	ne name of the corporatio	n is Rhode Islar	nd Medical Women's Association	
 2. Th	ne state or other jurisdicti	on under the lews	of which it is incorporated is RH	ODE ISLAND
	•		•	RANCIS STREET PROVIDENCE, RI
	2903			
			state at that address is EDWINA	
4. TI	he character of the affairs organization for	which it is actua woman phys	lly conducting in Rhode Island, bricsicians in Rhode Islan	afly stated, is Frofessional ad
	a foreign corporation, the corporated is N/A	•	incipal office in the state or other j	urisdiction under the laws of which it is
			Francis Street, Provid	dence, RI 02903
_			· ·· · · · · · · · · · · · · · · · · ·	
			fficers: (In compliance with 7-6-23 Hand) corporation shall not be less	of the R.I.G.L. 1956, as amended, the than three (3).)
	NAME	OFFICE	ADD	RESS
Franc	ces P. Conklin,	MD rector	106 Francis Street,	Providence, RI 02903
Elis	e Coletta, MD	Director	11	II
Elai	ne B. Fain, MD	 Director	" -	11
Marl	ene Cutitar, MD	 President	H	9
Kath	erine Buki, MD	— Vice-President	lt .	II .
Jane	Loitman, MD	— Secretary		n .
Pame	la Harrop, MD	 _Treasurer	11	ti
Dated	i: .June 19, 1998		Under penalty of perjury, I declare an report, including any accompanying all statements contained herein are tr	schedules and statements, and that
	81 1 1 1 1 1 1 1 1 1		Rhode Island Medical	Women's Association
FO File Da	R SECRETARY OF STATE USE	ONLY	By Market N	ame of Corporation
	aC(1)	_	Title President	
Check !	1000	-		e signed by an officer)
Ву:	<u> </u>			Form No. NP-13 Revised 5/98

Corporate ID Number......QQ465Q6.....

To be filed annually during the month of June

Annual Report for the year......1997.....

State of Rhode Island and Providence Plantations

Corporation Division 100 North Main Street Providence, RI 02903

NON-PROFIT CORPORATION

FIRST: The name	e of the corporation is	.Rhode.Island.Medical.Women!s.Association				
SECOND: It is inc	corporated under the I	aws ofRhode Island				
organization f	or women phys:	ich it is actually conducting in Rhode Island, briefly stated, is Professional icians in RI Branch 26 of the American Medical				
FOURTH: If a for	eign corporation, the a	address of its principal office in the state or country under the laws of				
which it is incorporated is .	,					
FIFTH: Corporate	FIFTH: Corporate address in Rhode Island106 Francis Street Providence, RI 02903					
		rectors and officers: (In compliance with 7-6-23 of the R.I.G.L. 1956, of a corporation shall not be less than three (3).)				
THIS REPORT	WILL NOT BE ACC	CEPTED UNLESS THREE (3) DIRECTORS ARE LISTED.				
NAME	OFFICE	ADDRESS				
Frances Conklin.	MD. Director	106 Francis Street, Providence, RI 02903				
Betty Mathieu M	DDirector	91 TER 10 10 TER 11				
Elaine Fain, MD	Director	11 11 11 11 11 11				
Elise Coletta, M	DPresident	106 Francis Street, Providence, RI 02903				
Marlene Cutitar,	MDVice-President	# 11 11 11				
Teri Pearlstein,	MDSecretary	11 11 11 11 11 11				
Pamela.Harrop.,M		H 41 H 17 11 11 11				
Dated: July 7, 19	97 19					
	lard.	(Name of Corporation)				
JUL 08	1221	By Damala Harran MD Macasauri				
CONP JUL 00		Title Pamela Harrop, MD, Treasurer (Report must be signed by an officer)				
C		• • • • • • • • • • • • • • • • • • • •				

If the corporation has changed its registered office and/or its registered agent, Form N-14 must be filed.

Please contact the Corporation Division, 277-3040, for further information.

State of Rhode Island and Frovidence Flantations NON-PROFIT CORPORATION

Corporate ID Number 0048308	3	Annual Report for the year 1996				
FIRST: The name of the corp	poration is Rh	ode Island Medical Women's Association				
SECOND: It is incorporated	under the laws	of Rhode Island				
THIRD: The character of the	affairs which	it is actually conducting in Rhode Island, briefly stated, is				
Professional organizat American Medical Womer	ion for w	omen physicians in RI. Branch 26 of the ation.				
FOURTH: If a foreign corpo	ration, the add	ress of its principal office in the state or country under the laws of				
which it is incorporated is	***************************************					
FIFTH: Corporate address in	n Rhode Island	.106 Francis Street, Providence, RI 02903				
SIXTH: Names and addresse	s of its directo	rs and officers:				
	(Addresses mus	st include street and number, if any)				
NAME Frances Conklin, MD	office Director	ADDRESS 106 Francis Street, Providence, RI 02903				
Betty Mathieu, MD	Director					
Elaine Fain, MD	Director					
Elise Coletta, MD I	President					
Marlene Cutifar, MD	Vice President					
Teri Pearlstein, MD	Secretary					
Pamela Harrop, MD (If additional space is needed, attach ri	Treasurer ider)					
Dated: June 7	196	Rhode Island Medical Women's Association				
90	FILED	(Name of Corporation) By Amelia Harron M)				
Mar B 2 53 Par 101	UL 0 8 1996	Title Treasurer				
The state of the s	389)	(Report must be signed by an officer)				
		ged its registered office and/or its registered agent, contact Corporation Division for information, 277-3040				

Filing Fee: \$20.00

State of Rhode Island and Providence Plantations NON-PROFIT CORPORATION

Corporate ID	Number 00	48308	Annual Report for the year 1995
First:	The name of the o	corporation is	Rhode Island Medical Women's Association
SECOND	It is incorporate	ed under the law	s of Rhode Island
THIRD:	The character of	the affairs which	it is actually conducting in Rhode Island, briefly stated, is
	sional organ can Medical		women physicians in RI. Branch 26 of the sociation.
	_	•	dress of its principal office in the state or country under the laws of
Г ігтн:	Corporate address	s in Rhode Island	d 106 Francis Street, Providence, RI 02903
Sіхтн:	Names and addre	sses of its directo	ors and officers:
		(Addresses mu	ust include street and number, if any)
	NAME Conklin, MD	OFFICE Director	ADDRESS 106 Francis Street, Providence, RI 02903
Betty Ma	thieu, MD	. Director	
Elaine Fa	ain, MD	Director	
Kathleen	Fitzgerald,	. Mesident	
*******************	letta, MD	. Vice President	
Janice K	izirian, MD	Secretary	
***************************************	arrop, MD	Treasurer	
.T.11	pace is needed, attacl ne 7, 1996	•	
Dated:		ILED	Rhode Island Medical Women's Association (Name of Comporation) Ry Tamela Marroy M
95, ;	UU S 2 1/1	0 8 1996 C#63 3891	Treasurer Title (Report must be signed by an officer)
3/V <u>1.</u> G.			ged its registered office and/or its registered agent, contact Corporation Division for information, 277-3040

State of Rhode Island and Frovidence Plantations NON-PROFIT CORPORATION

Corporate ID Number 0048308	А	Annual Report for the year 1994				
FIRST: The name of the corporation i	s RHODE ISLAN	ID MEDICAL	WOMEN'S ASSOC	IATION		
SECOND: It is incorporated under the	laws of	RHODE ISLAN	D			
THIRD: The character of the affairs w	•	_	•			
Professional organization for American Medical Women's Ass	or women phys	sicians in	RI. Branch 26	of the		
FOURTH: If a foreign corporation, the	address of its prin	cipal office in the	e state or country u	nder the laws of		
which it is incorporated is						
FIFTH: Corporate address in Rhode Is	sland 106 F	rancis Str	eet, Provider	ce, RI 02903		
	ectors and officers:	number if any, and	•			
Frances Conklin, MD Director	106 Franci	AD s St., Pro.	DRESS v., RI	•		
Betty Mathieu, MD Director	n 11	***************************************	11	•••••••••••••••••••••••••••••••••••••••		
Elaine Fain, MD Director	ır n		11			
Kathleen Fitzgerald, pMD:dent	106 Franc	is Street,	Providence,			
Elise Coletta, MD Vice Presid	ent	n				
Janice Kizirian, MD Secretary	11	Я	n			
PamelaHarrop,MD Treasurer (If additional space is needed, attach rider)	ės	n	tt			
Dated: June 1, 1994	(Name of Corporation	(חו				
FILED	By. Cl	use M Co	letter			
JAN 2 0 1995	Title -Treas	wer VICe	President	•••••		
By 11179			(Report must be sig	ned by an officer)		

If the corporation has changed its registered office and/or its registered agent, Form N-14 must be filed. Please contact Corporation Division for information, 277-3040 Mail with fee to: Corporations Division, 100 North Main Street, Providence, RI 02903.

State of Rhode Island and Providence Plantations NON-PROFIT CORPORATION

Corporate ID Number0048308	Annual Report for the year 1993
FIRST: The name of the corporation isR	hode Island Medical Women's Association
SECOND: It is incorporated under the laws of.	Rhode Island
	actually conducting in Rhode Island, briefly stated, isomen physicians in RI. Branch 26 of the
American Medical Women's Associ	
which it is incorporated is	
FIFTH: Corporate address in Rhode Island	106 Francis Street, Providence, RI 02903
SIXTH: Names and addresses of its directors ar	
(Addresses must inc	lude street, number if any, and zip code) ADDRESS
	Francis St., Prov., RI
Elaine Fain, MD "	11 11
Betty Mathieu, MD	н
Lynn Epstein, MD	6 Francis Street, Providence, RI 02903
Kathleen Fitzgerald, Wice President	n n n
Janice Kizirian, MD	11 11 11 11 1
Elise Coletta, MD	и и м
If additional space is needed, attach rider)	
Dated: June 1 19 ⁹⁴	
	e of Corporation)
(Nan	Gol Hans
× ₁ / ₄ .	Elise M Colettans
By Lathlee Typish Title	Elise M Colettans

Form N-14 must be filed. Please contact Corporation Division for information, 277-3040

Mail with fee to: Corporations Division, 100 North Main Street, Providence, RI 02903. JAN 2 0 1995

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State of Rhode Island and Providence Plantations NON-PROFIT CORPORATION

Corporate ID Number 0048308	Annual Report for the year 1992					
FIRST: The name of the corporation is	RI M	edical V	Momen's			
SECOND: It is incorporated under the law	vs of	Rhod	de Island	1		
THIRD: The character of the affairs which Professional organization for American Medical Women's Ass	r wc	men phy	sicians	•	nch 2	*
FOURTH: If a foreign corporation, the ad	dress	of its princi	pal office in	the state or countr	ry unde	er the laws of
which it is incorporated is	. 			*******************************		••••
FIFTH: Corporate address in Rhode Islan	d	l06 Fran	ncis Stre	eet, Provide	nce,	RI 02903
SIXTH: Names and addresses of its direct						
(Addresses mu	ıst incli	ide street, nu	•	• ,		
NAME OFFICE Frances Conklin, MD	ADDRESS 106 Francis St., Prov., RI					
Debra Solomon, MD		II	FI	IT		•••••••••••••••••••••••••••••••••••••••
Elaine Fain, MD Director	•••••		······································	11		······································
Lunn C. English MD	100	71 !			·············	
Ficonett	********		Street,	Providence,	, <u>R1</u>	02903
Kathleen Fitzgerald, Mce President		• • • • • • • • • • • • • • • • • • • •			• • • • • • • • • • • • • • • • • • • •	
Janice Kizirian, MD Secretary						
Elise Coletta, MD Treasurer If additional space is needed, attach rider)		••••••		u		••••••
Dated: June 1 1994						
Jaica 17	(Name	of Corporation)	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		***********	***************************************
*/ / /	Ву	Clise!	M Cole	tte	••••••	•••••
Yalla Jehnell A	Title	Treasur	er			•••••••••
Harries The state of the				(Report must be	signed	hyan officer)
If the corporation has chang	ed its r	egistered offi	ce and/or its i	egistered agent,		LILED

JAN 2 0 1995

By_y

Form N-14 must be filed. Please contact Corporation Division for information, 277-3040 Mail with fee to: Corporations Division, 100 North Main Street, Providence, RI 02903.

State of Rhode Island and Providence Plantations NON-PROFIT CORPORATION

Corporate ID Number 0048308	Annual Report for the year1991					
FIRST: The name of the corporation is	Rhode	••••••••••	Medical	*****************	•••	
SECOND: It is incorporated under the law	vs of					
THIRD: The character of the affairs whic Professional organization f	h it is actu or wome	ally condu en phys	cting in Rhe	ode Island, n RI. B	briefly stat ranch 2	ed, is 6 of the
American Medical Women's As	sociati	ion.	•••••••••			
FOURTH: If a foreign corporation, the ad	dress of it	s principal	office in the	e state or co	ountry und	er the laws of
which it is incorporated is	***************************************		•••••	•••••	•••••	
FIFTH: Corporate address in Rhode Islan	10 <i>6</i>	Franc	is Stree	t, Prov	idence,	RI 02903
(Addresses mo	ıst include s	treet, numb	•	• ,		
Frances Conklin, MD Director	106	Franci	s St., F	DRESS Prov F	₹T	
Flico Colotta MD	1)	······	• • • • • • • • • • • • • • • • • • • •	11	••••••	······································
Janic Kizirian, MD		н	• • • • • • • • • • • • • • • • • • • •	11		
Debra Solomon, MD President	106 Fr	ancis :	Street,	Provide	nce, RI	
Lynn C. Epstien, MD Vice President					*********	11
Leslie Cashel, MD Secretary	11		11		*******************************	•
S. Deborah Murphy, MD Treasurer	11	••••••	H	11		11
If additional space is needed, attach rider)	•••••	*************		******************	•••••	***************************************
Dated: June 1 19 ⁹⁴	(Name of Co	opporation)	0,5	Druse.	μλ	······································
	Title Pre	esident	Ú99	/)·		•••••••
				/ (Report m	ust be signe	Con Em Emilia

If the corporation has changed its registered office and/or its registered agent, Form N-14 must be filed. Please contact Corporation Division for information, 277-3040 Mail with fee to: Corporations Division, 100 North Main Street, Providence, RI 02903.

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