



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

Fee: \$20.00

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: 2018

1. Corporate ID No. 000030607

2. Name of Corporation The Rhode Island Pharmacists Association

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
813920

4. Corporate Address in Rhode Island

No. and Street: 1643 WARWICK AVENUE, PMB 113

City or Town: WARWICK

State: RI Zip: 02889 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

MEMBERSHIP ASSOCIATION PROMOTING THE PROFESSION OF PHARMACY AND PROVIDING CONTINUING EDUCATION

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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. 7-6-23

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	LUCREZIA FINEGAN	1331 BALDWIN HILL ROAD GALES FERRY, CT 06335 USA
TREASURER	JOHN GROSSOMANIDES	153 HIGH STREET, #3 WESTERLY, RI 02891 USA
SECRETARY	CHRISTINE EISENHOWER	140 5TH STREET PROVIDENCE, RI 02906 USA
VICE PRESIDENT	NICOLE ASAL	27 EVERGREEN STREET, UNIT A, PROVIDENCE, RI 02906 USA
DIRECTOR	KENNY CORREIA	235 GREENWOOD STREET CRANSTON, RI 02910 USA
DIRECTOR	KATHERINE CORSI	300 BUNGY ROAD NORTH SCITUATE, RI 02857 USA
DIRECTOR	CHRISTOPHER FEDERICO	499 HIGHLAND AVE ATTLEBORO, MA 02703 USA
DIRECTOR	PATRICK KELLY	58 REMINGTON FARM ROAD COVENTRY, RI 02816 USA
DIRECTOR	DANIEL LEFKOWITZ	137 MOUNTAIN LAUREL DRIVE CRANSTON, RI 02920 USA
DIRECTOR	MADELEINE NG	42 FREMONT STREET, APT 1 PROVIDENCE, RI 02906 USA
DIRECTOR	ANTHONY HARRISON	65 MODENA AVE PROVIDENCE, RI 02908 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**

DANIEL ROWAN 1643 WARWICK AVENUE, PMB 113 WARWICK , RI 02889

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

Signed this 13 Day of June, 2018 at 10:05:29 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 § 7-6.*

By JOHN GROSSOMANIDES
Signature of Authorized Person

Form No. 631
Revised 09/07

