



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: **2018**

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.

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STATE
SECRETARY OF
CORPORATIONS
JUN 19 2018
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| | | | | | |
|--|-----------------|--|---|------------------------|---------------------|
| 1. Entity ID Number 109709 | | 2. Exact name of the Corporation Rhode Island Nursing Home Group, Inc. | | | |
| 3. State of Incorporation RI | | 5. Brief description of the character of business conducted in Rhode Island To engage in activities relating to group self-insurance of workers' compensation liability for members of the corporation | | | |
| 4. NAICS Code 813920 - Professional Organiza | | | | | |
| 6. Principal Office Address 60 Catamore Blvd./Starkweather & Shelpley | | City East Providence | | State RI | Zip 02914 |
| 7. List ALL officers (names and addresses) Check the box to indicate an attachment <input checked="" type="checkbox"/> | | | | | |
| President Name Kevin McKay | | | Vice-President Name Elizabeth Sarro | | |
| Street Address c/o Tockwotton Home, 500 Waterfront Dr. | | | Street Address c/o Bethany Home, 111 South Angell Street | | |
| City East Providence | State RI | Zip 02914 | City Providence | State RI | Zip 02906 |
| Secretary Name Laurie Ann Oliveira | | | Treasurer Name Deborah Griffin | | |
| Street Address c/o The Seasons, 5 St. Elizabeth Way | | | Street Address c/o Hattie Ide Chaffee, 200 Wampanoag Trail | | |
| City East Greenwich | State RI | Zip 02818 | City East Providence | State RI | Zip 02914 |
| 8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/> | | | | | |
| Director Name Stephanie Igoe | | | Director Name Julie Richard | | |
| Street Address c/o Hallworth House, 66 Benefit Street | | | Street Address c/o Steere House, 100 Borden Street | | |
| City Providence | State RI | Zip 02904 | City Providence | State RI | Zip 02903 |
| Director Name Joy Ryan | | | Director Name Kerry McGuinness | | |
| Street Address c/o Scalabrini Villa, 860 Quidnesett Road | | | Street Address c/o Scandinavian Home, 1811 Broad Street | | |
| City No. Kingstown | State RI | Zip 02852 | City Cranston | State RI | Zip 02905 |
| 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 Brian Zartarian | | | | Date 6/18/18 | |
| Signature of Officer/Authorized Representative <i>Brian Zartarian</i> | | | | | |

FILED

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 19 2018

BYS 333077 FORM 631 - Revised: 11/2017

Additional Officers:

Assistant Treasurer: Amy Guldhaug, c/o Starkweather & Shepley, P.O. Box 549,
Providence, RI 02901

Assistant Treasurer: James Arnold, c/o Starkweather & Shepley, P.O. Box 549,
Providence, RI 02901

Assistant Secretary: Brian Zartarian, c/o Starkweather & Shepley, P.O. Box 549,
Providence, RI 02901