RI SOS Filing Number: 201870902630 Date: 6/28/2018 4:12:00 PM



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

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.** 000040719
- 2. Name of Corporation SOCIETY FOR PEDIATRIC PATHOLOGY
- 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

6

Fee: \$20.00

813920

4. Corporate Address in Rhode Island

No. and Street: 355 LEXINGTON AVE, 15TH FLOOR

City or Town: NEW YORK State: RI Zip: 10017 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 355 LEXINGTON AVE, 15TH FLOOR

City or Town: NEW YORK State: NY Zip: 10017 Country: USA

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

FOSTERING EDUCATION, RESEARCH & PRACTICE IN PEDIATRIC PATHOLOGY.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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

| Title | Individual Name | Address |
|------------------|-----------------------------|---|
| | First, Middle, Last, Suffix | Address, City or Town, State, Zip Code, Country |
| PRESIDENT | SARA VRGAS | 355 LEXINGTON AVE, 15TH FLOOR NEW YORK, NY 10017 USA |
| TREASURER | LINDA ERNST | 355 LEXINGTON AVE, 15TH FLOOR NEW YORK, NY 10017 USA |
| SECRETARY | FUSUN GUNDOGAN | 355 LEXINGTON AVE, 15TH FLOOR NEW YORK, NY 10017 USA |
| PAST PRESIDENT | MIGUEL REYES-MUGICA | 355 LEXINGTON AVE, 15TH FLOOR NEW YORK, NY 10017 USA |
| PRESIDENT- ELECT | CHARLES TIMMONS | 355 LEXINGTON AVE, 15TH FLOOR NEW YORK, NY 10017 USA |
| DIRECTOR | LAURA FINN | 355 LEXINGTON AVE, 15TH FLOOR NEW YORK, NY 10017 USA |
| DIRECTOR | JIM WRIGHT | 355 LEXINGTON AVE, 15TH FLOOR NEW YORK, NY 10017 USA |
| DIRECTOR | MARTHA JONES | 355 LEXINGTON AVE, 15TH FLOOR NEW YORK, NY 10017 USA |
| DIRECTOR | EDUARDO ZAMBRANO | 355 LEXINGTON AVE, 15TH FLOOR NEW YORK, NY 10017 USA |
| DIRECTOR | HAL HAWKINS | 355 LEXINGTON AVE, 15TH FLOOR NEW YORK, NY 10017 USA |
| DIRECTOR | GINO SOMERS | 355 LEXINGTON AVE, 15TH FLOOR NEW YORK, NY 10017 USA |
| DIRECTOR | SAMIAL MANGRAY | 355 LEXINGTON AVE, 15TH FLOOR NEW YORK, NY 10017 USA |
| DIRECTOR | REBECCA BAERGEN | 355 LEXINGTON AVE, 15TH FLOOR NEW YORK, NY 10017 USA |
| DIRECTOR | MEGAN DISHOP | 355 LEXINGTON AVE, 15TH FLOOR NEW YORK, NY 10017 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

JAMES P. REDDING, ESQ. 27 SAKONNET POINT ROAD LITTLE COMPTON, RI 02837

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

Signed this 28 Day of June, 2018 at 4:12:29 PM 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 HANNAH PERKINS Signature of Authorized Person

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