



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:** 2019

**1. Corporate ID No.** 000067462

**2. Name of Corporation** Rhode Island Health Information Management Association (RIHIMA)

**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

813920

**4. Corporate Address in Rhode Island**

No. and Street: C/O CANDACE COLLINS

151 FRANKLIN ROAD

City or Town: FOSTER

State: RI

Zip: 02825

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**

TO MAINTAIN & IMPROVE THE QUALITY OF HEALTH INFO SERVICES, PROMOTE THE ART & SCIENCE OF MEDICAL RECORD ADMINISTRATION

**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**Incorporator is no longer applicable; please delete**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**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	PATTI NENNA	12 GREGG DRIVE BRISTOL, RI 02809 USA
TREASURER	SUSAN FARKAS	28 NEWBURG STREET JOHNSTON, RI 02919 USA
SECRETARY	ANN SCHIMANSKY	16 ROUNDTABLE COURT WEST KINGSTON, RI 02892 USA
PAST PRESIDENT	DONNA CORBANI	41 ATLANTIC AVE WARWICK, RI 02888 USA
PRESIDENT-ELECT	PATTI NENNA	12 GREGG DRIVE BRISTOL, RI 02809 USA
DIRECTOR	JUDITH DONAHUE	103 LYMAN AVE WARWICK, RI 02888 USA
DIRECTOR	CECIBEL CASTILLO	16 CARDER ST PROVIDENCE, RI 02904 USA
DIRECTOR	JENNIFER RAMSAY	185 MCARTHUR BLVD COVENTRY, RI 02816 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**

CANDACE COLLINS 151 FRANKLIN ROAD FOSTER , RI 02825

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

**Signed this 25 Day of May, 2019 at 9:13:27 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 CANDACE COLLINS  
Signature of Authorized Person

Form No. 631  
Revised 09/07