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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

Foreign Non-Profit 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. 000164745
- 2. Name of Corporation HFMA: Massachusetts-Rhode Island Chapter
- 3. State of Incorporation

State: IL

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 <u>click here.</u>

NAICS Code

6

Fee: \$20.00

813920

4. Corporate Address in Rhode Island

No. and Street: C/O C T CORPORATION SYSTEM

450 VETERANS MEMORIAL HIGHWAY, SUITE

7A

City or Town: <u>EAST PROVIDENCE</u> State: RI Zip: <u>02914</u>Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 3 CORPORATE WESTBROOK CENTER

SUITE 600

City or Town: WESTCHESTER State: IL Zip: 60154 Country: USA

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

TO IMPROVE FINANCIAL MANAGEMENT OF HEALTHCARE INSTITUTIONS AND RELATED PATIENT CARE

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	DAVID C TOLLEY	200 CLARENDON ST BOSTON, MA 02116 USA
TREASURER	KAREN KINSELLA	100 FEDERAL STREET MA5-100-09-10 BOSTON, MA 02110 USA
SECRETARY	ANNAMARIE MONKS	18 FREDRIC LANE MANSFIELD, MA 02048 USA
CORPORATE SECRETARY	TRACY PACKINGHAM	3 WESTBROOK CORPORATE CTR, SUITE 600 WESTCHESTER, IL 60154 USA
PRESIDENT-ELECT	DEBORAH D SCHOENTHALER	600 UNICORN PARK, 4TH FL WOBURN, MA 01801 USA
PAST CHAPTER PRESIDENT	GARRETT G GILLESPIE	529 MAIN ST., SUITE 500 CHARLESTOWN, MA 02129 USA
DIRECTOR	JENNIFER SAMARAS	4 BRISTOL LANE ANDOVER, MA 01810 USA
DIRECTOR	KAREN GRANOFF	500 DISTRICT AVENUE BURLINGTON, MA 01803 USA
DIRECTOR	JENNY DAVIES	361 WHITNEY AVENUE HOLYOKE, MA 01040 USA
DIRECTOR	DHARA SATIJA	18 HEPATICA DRIVE NORTH ANDOVER, MA 01845 USA
DIRECTOR	BETH OTOOLE	64 POND LANE RANDOLPH, MA 02368 USA
DIRECTOR	PATRICK J MCDONOUGH	725 CANTON ST. NORWOOD, MA 02062 USA
DIRECTOR	ERIK W LYNCH	200 PORTLAND STREET BOSTON, MA 02114 USA
DIRECTOR	JOHN D REARDON	33 NANCY ROAD MILTON, MA 02186 USA
DIRECTOR	NAN M JONES	172 ELMLAWN ROAD BRAINTREE, MA 02184 USA
DIRECTOR	ROGER PRICE	16 APRIL LANE WESTFORD, MA 01886 USA
DIRECTOR	GARY M JANKO	1740 MASSACHUSETTS AVENUE BOXBOROUGH, MA 01719 USA
DIRECTOR	JOANNA K KROON	312 BOXFORD STREET NORTH ANDOVER, MA 01845 USA
DIRECTOR	KIMBERLY M CARLOZZI	24 WINTHROP STREET MILTON, MA 02186 USA
DIRECTOR	KATE STEWART	ONE FINANCIAL CENTER BOSTON, MA 02111 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

 $\frac{\text{CT CORPORATION SYSTEM}}{\text{PROVIDENCE}\;,\;\; \text{RI}\;\; 02914} \;\; \underline{\text{450 VETERANS MEMORIAL PARKWAY, SUITE 7A}}$

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

Signed this 29 Day of May, 2019 at 4:10:57 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 TRACY PACKINGHAM

Signature of Authorized Person

Form No. 631 Revised 09/07

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