



**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. 000091577

2. Name of Corporation Southeastern Healthcare System, Inc.

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
999999

4. Corporate Address in Rhode Island

No. and Street: 111 BREWSTER STREET
City or Town: PAWTUCKET

State: RI Zip: 02860 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 DEVELOP OPERATE AND MAINTAIN AND INTEGRATED HEALTH CARE SYSTEM FOR THE DELIVERY OF MEDICAL AND SURGICAL TREATMENT.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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 | JAMES FANALE, MD | 45 WILLARD AVENUE PROVIDENCE, RI 02905 USA |
| TREASURER | DOUGLAS JACOBS | 1141 NORTH MAIN ROAD JAMESTOWN, RI 02835 USA |
| SECRETARY | JAMES BOTVIN | 12 BAGY WRINKLE COVE WARREN, RI 02885 USA |
| VICE-CHAIRPERSON | GARY E. FURTADO | 15 BETH AVENUE WARREN, RI 02885 USA |
| VICE-CHAIRPERSON | MARIBETH WILLIAMSON | 450 WAKEFIELD STREET WEST WARWICK, RI 02893 USA |
| ASSISTANT TREASURER | JOSEPH IANNONI | 45 WILLARD AVENUE PROVIDENCE, RI 02905 USA |
| CHAIRPERSON | CHARLES R. REPPUCCI | 50 KENNEDY PLAZA, STE. 1500 PROVIDENCE, RI 02903 USA |
| EX OFFICIO DIRECTOR | JAMES FANALE, MD | 45 WILLARD AVENUE PROVIDENCE, RI 02905 USA |
| ASSISTANT SECRETARY | ASHLEY TAYLOR ESQ | 45 WILLARD AVENUE PROVIDENCE, RI 02905 USA |
| EX OFFICIO DIRECTOR | TOLGA KOKTURK M.D. | 101 DUDLEY STREET PROVIDENCE, RI 02905 USA |
| EX OFFICIO DIRECTOR | KEVIN BAILL M.D. | 345 BLACKSTONE BOULEVARD PROVIDENCE, RI 02906 USA |
| EX OFFICIO DIRECTOR | EDWARD THOMAS M.D. | 455 TOLL GATE ROAD WARWICK, RI 02886 USA |
| DIRECTOR | ALLEN H. CICCHITELLI | 118 ABONDANCE DRIVE PALM BEACH GARDENS, FL 33410 USA |
| DIRECTOR | GARY E. FURTADO | 15 BETH AVENUE WARREN, RI 02885 USA |
| DIRECTOR | JAMES BOTVIN | 12 BAGY WRINKLE COVE WARREN, RI 02885 USA |
| DIRECTOR | SHARON CONARD-WELLS | 85 MAJESTIC AVENUE WARWICK, RI 02888 USA |
| DIRECTOR | KENT W. GLADDING | 10 JAY COURT CRANSTON, RI 02921 USA |
| DIRECTOR | DOUGLAS JACOBS | 1141 NORTH MAIN ROAD JAMESTOWN, RI 02835 USA |
| DIRECTOR | MARIBETH WILLIAMSON | 450 WAKEFIELD STREET WEST WARWICK, RI 02893 USA |
| DIRECTOR | GEORGE W. SHUSTER | 44 ROBIN VALE DRIVE NORTH SCITUATE, RI 02857 USA |
| DIRECTOR | CHARLES R. REPPUCCI | 50 KENNEDY PLAZA PROVIDENCE, RI 02903 USA |
| DIRECTOR | CYNTHIA B. PATTERSON | 33 KEENE STREET PROVIDENCE, RI 02906 USA |
| DIRECTOR | JOSEPH J. MCGAIR, ESQ. | 92 SANDY LANE WARWICK, RI 02886 USA |
| DIRECTOR | MARIO BUENO | 98 FLETCHER AVENUE CRANSTON, RI 02920 USA |
| DIRECTOR | PATRICK J. MURRAY, JR. | 255 BOXWOOD LAND |

| | | |
|----------|------------------|--|
| | | BRIDGEWATER, MA 02324 USA |
| DIRECTOR | WILLIAM M. KAPOS | 401 OCEAN ROAD NARRAGANSETT, RI 02882 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**

ASHLEY TAYLOR 45 WILLARD AVENUE PROVIDENCE , RI 02905

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

Signed this 14 Day of June, 2019 at 2:40:40 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 ASHLEY TAYLOR
Signature of Authorized Person

Form No. 631
Revised 09/07

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