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State of Rhode Island and Department of State			ivision	4		
Annual Report for the year: Non-Profit Corporation	2019				SECRET COPPE	
→ Filing period: June 1 - June 30 → Filing Fiee - \$20,00 → Penalty - Additional \$25,00 fee if	form is not filed by .	July 30			135 Y S	
1 Entity ID Number	2. Exact name of	•			<del>-</del> Ωω	
001669236	<b>Partners</b>	Partnership for Rhode Island				
3. State of Incorporation	5. Brief descripte	Brief description of the character of business conducted in Rhode Island				
Rhode Island	To bring toge	To bring together chief executive officers from R.L's leading businesses and institutions				
4 NAICS Code	to tackle systemic issues and achieve lasting improvement in the state's economy in					
813990 - Other Similar Orga	collaboration	w/ public offic	ials and business civic leade	rs in the state.		
6 Principal Office Address	<u> </u>		City	State	Zıp	
One Union Station			Providence	RI	02903	
7. List Acconficers (names and add		heck the box to indica	ite an attachment			
President Name Thomas Lawson			Vice-President Name Larry Melo			
Street Address 270 Central Avenue			Street Address 1 CVS Drive			
<sup>Ĉ⊢y</sup> Johnston	State RI	<sup>Zip</sup> <b>0291</b> 9	Cily Woonsocket	State RI	<sup>Zip</sup> 02895	
Secretary Name Thomas Gilbane			Treasurer Name Neil Steinberg			
Street Address 7 Jackson Walkway			Street Address One Union Station			
<sup>Cly</sup> Providence	State RI	<sup>Zip</sup> 02903	City Providence	State RI	Z.p 02903	
8. List A. Lidirectors (names and ac	Joresses) RI Corp	orations MUST li	st at least THREE directors.	heck the box to indica	ite an attachment [	
Director Name SEE THE ATTACHED ADDITIONAL			Director Name			
Street Address INFORMATION SHEET FOR DIRECTORS			Street Address			
Gry	State	Zip	City	State	Zip	
Director Name	ctor Name		Director Name			
Street Address			Street Address			
City	State	Zip	City	State	Zıp	
9 Registered Agent in Rhode Islan	d. This information i	s currently of record	1 in the Department of State. Changes	require filing Form 64	1.	
Under penalty of perjury, I declar statements, and that all statemen				mpanying schedu	les and	
This report must be signed by either the Pres				ntative, Receiver or Trust	ee	
Name of Officer/Authorized Repres	sentative			Date	_	
Tom Giordano				July 24, 201	9	
Signature of Officer/Authorized Rep	FII FD					
Thomas J. Giordano -		<i>y</i>				

MAIL TO-

Division of Businoss Services 148 W. River Street Providence. Rhode Island 02904-2615. Phone. (401):272-5040.

Website www.sos.ii.gov

JUL 26 2019 BY KL ZPDHH

FORM 631 - Revisad: 06/2019

# NON PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2019

Additional Information Sheet 1 of 2

#### PARTNERSHIP FOR RHODE ISLAND

CORPORATE I.D. No: 001669236

### 7. List ALL officers (names and addresses) (cont.)

Name Address

Tom Giordano, Executive Director One Union Station

Providence, RI 02903

8. List ALL directors (names and addresses) (cont.)

Name Address

Renato Ascoli 10 Memorial Boulevard

Providence, RI 02903

Robert A. DiMuccio 100 Amica Way

Lincoln, RI 02865

Jeffrey S. Geiger 75 Eastern Point Road

Groton, CT 06340

Thomas Gilbane 7 Jackson Walkway

Providence, RI 02903

Brian Goldner 1027 Newport Avenue

Pawtucket, RI 02861

Larry Merlo 1 CVS Drive

Woonsocket, RI 02895

Thomas Lawson 270 Central Avenue

Johnston, RI 02919-4949

Brian Moynihan 100 N. Tryon Street

Charlotte, NC 28255

Jonathan M. Nelson 50 Kennedy Plaza, 18<sup>th</sup> Floor

Providence, RI 02903

Christina Paxson Box 1860

Providence, RI 02912

## NON PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2019

Additional Information Sheet 2 of 2

#### PARTNERSHIP FOR RHODE ISLAND

CORPORATE I.D. No: 001669236

### 8. List ALL directors (names and addresses) (cont.)

Name Address

Neil Steinberg One Union Station

Providence, RI 029032

Bruce Van Saun 1 Citizens Plaza

Providence, RI 02903