



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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Annual Report for the year: **2020**

Non-Profit Corporation

2020 JUN 19 AM 11:01

→ Filing period: June 1 - June 30

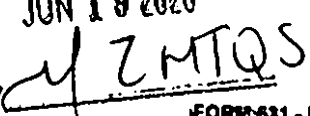
→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by July 30.

1. Entity ID Number 000070707		2. Exact name of the Corporation RHODE ISLAND HOSPITAL FOUNDATION			
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island To engage in philanthropic activities to support the mission and purpose of Rhode Island Hospital.			
4. NAICS Code 813319 - Other Social Adv ☐					
6. Principal Office Address 593 Eddy Street			City Providence	State RI	Zip 02903
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name John B. Murphy, M.D.			Vice-President Name		
Street Address 593 Eddy Street			Street Address		
City Providence	State RI	Zip 02903	City	State	Zip
Secretary Name Anthony Calandrelli			Treasurer Name Ellen A. Collis		
Street Address 19 Grosvenor Ave			Street Address 8 Pheasant Lane		
City East Providence	State RI	Zip 02914	City Barrington	State RI	Zip 02806
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment ☒					
Director Name Robert K. Vincent (Chair)			Director Name Elizabeth Huber (Vice Chair)		
Street Address 10 Memorial Boulevard			Street Address PO Box 4910		
City Providence	State RI	Zip 02903	City Rumford	State RI	Zip 02916
Director Name Lawrence A. Aubin, Sr. (ex-officio)			Director Name Timothy J. Babineau, M.D.		
Street Address Aubin Corporation, 1460 Fall River Ave			Street Address 593 Eddy Street		
City Seekonk	State MA	Zip 02771	City Providence	State RI	Zip 02903
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
<i>Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.</i>					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>					
Name of Officer/Authorized Representative John B. Murphy, M.D.					Date 6/11/20
Signature of Officer/Authorized Representative 					

FILED

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

JUN 19 2020
BY 
FORM 631 - Revised: 06/2019

Rhode Island Hospital Foundation
ID# 70707

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Cumberland, RI 02864

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Providence, RI 02903

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Providence, RI 02903

Elizabeth Burke Bryant
RI Kids Count
One Union Station
Providence, RI 02903

Anthony Calandrelli
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East Providence, RI 02914

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PO Box 9088
Providence, RI 02940

Ellen A. Collis
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Barrington, RI 02806

Michael V. D'Ambra
D'Ambra Construction Co, Inc.
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Coventry, RI 02816

Phyllis A. Dennery, M.D.
Pediatrician in Chief
Hasbro Children's Hospital
593 Eddy Street, Suite 125
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Edward G. Fischer, M.D.
8 Halidon Avenue
Newport, RI 02840

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Kristen Haffenreffer
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Providence, RI 02906

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Rhode Island Hospital
593 Eddy Street, APC701
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Pawtucket, RI 02862

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President, Citizens Bank Rhode Island
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Providence, RI 02903

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1 West Exchange Street, #2706
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Bradford S. Dimeo
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Barrington, RI 02806

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Elizabeth J. Perik
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