



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State  
Matthew A. Brown, Secretary of State

Corporations Division  
100 North Main Street  
Providence, RI 02903-1335  
401.222.3040

**NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005**

Filing Period: June 1 - June 30 • Filing Fee: \$20.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 115283		2. Name of Corporation Eastern Allergy Conference, Inc.	
3. State of Incorporation RHODE ISLAND		4. Corporate address in Rhode Island - Street Address 95 Pitman Street	
		City Providence	Zip 02906
5. Foreign corporation. Enter principal office address		City	State
			Zip
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island EDUCATION; FOR PHYSICIANS AND NURSES, UPDATING NEW DEVELOPMENTS IN MEDICINE IN THE ALLERGY FIELD.			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name		Vice President Name	
Street Address		Street Address	
City	State	City	State
Zip		City	State
Secretary Name		Treasurer Name	
Street Address		Street Address	
City	State	City	State
Zip		City	State
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS		THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		City	State
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		City	State
9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78			
Agent Name		Address	
Address		City	Zip

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



115283

**FILED**

File Date

Check No

By

FOR SECRETARY OF STATE USE ONLY

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.

Signature of Officer

Date

Print or Type Name of Officer

Title of Officer

Additional Director

Michael Slaughter, M.D.  
536 Bay Road, Suite #1  
Queensbury, NY 12804

Robert Sett, pane, M.D.  
95 Pitman St  
Providence, RI 02906

**FILED**  
JUL 06 2005  
By GM

05 JUL -6 PM 12:10



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State  
Matthew A. Brown, Secretary of State

Corporations Division  
100 North Main Street  
Providence, RI 02903-1335  
401 222 3010

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: June 1 - June 30 • Filing Fee: \$20.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No <b>115283</b>		2. Name of Corporation <b>Eastern Allergy Conference, Inc.</b>			
3. State of Incorporation <b>RHODE ISLAND</b>	4. Corporate address in Rhode Island - Street Address <b>95 Pitman Street</b>		City <b>Providence</b>	Zip <b>02906</b>	
5. Foreign corporation. Enter principal office address		City	State	Zip	
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island <b>EDUCATION; FOR PHYSICIANS AND NURSES, UPDATING NEW DEVELOPMENTS IN MEDICINE IN THE ALLERGY FIELD.</b>					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name <b>Guy A. Settupane, M.D.</b>		Vice President Name <b>Russell A. Settupane, M.D.</b>			
Street Address <b>95 Pitman St</b>		Street Address <b>95 Pitman St</b>			
City <b>Providence</b>	State <b>RI</b>	Zip <b>02906</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02906</b>
Secretary Name <b>Clifford Tepper, M.D.</b>		Treasurer Name <b>Russell A. Settupane, M.D.</b>			
Street Address <b>2216 Stoneridge Rd</b>		Street Address <b>95 Pitman St</b>			
City <b>Niskayuna</b>	State <b>NY</b>	Zip <b>12309</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02906</b>
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23					
Director Name <b>Guy A. Settupane, M.D.</b>		Director Name <b>Russell A. Settupane, M.D.</b>			
Street Address <b>95 Pitman St.</b>		Street Address <b>95 Pitman St</b>			
City <b>Providence</b>	State <b>RI</b>	Zip <b>02906</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02906</b>
Director Name <b>Clifford Tepper, M.D.</b>		Director Name <b>Agile Redmon, M.D.</b>			
Street Address <b>2216 Stoneridge Rd</b>		Street Address <b>5223 Contour Place</b>			
City <b>Niskayuna</b>	State <b>NY</b>	Zip <b>12309</b>	City <b>Houston</b>	State <b>TX</b>	Zip <b>77096</b>
9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78					
Agent Name <b>GUY A SETTIPANE, M.D.</b>		Address			
Address <b>95 PITMAN STREET</b>		City <b>PROVIDENCE</b>	Zip <b>02906-</b>		

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

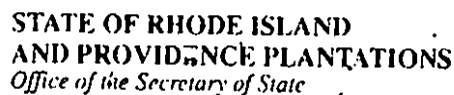


\* 1 1 5 2 8 3 \*

File Date	<b>7/7/04</b>
Check No	<b>1186</b>
By:	<b>DA</b>
FOR SECRETARY OF STATE USE ONLY	

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.

**Russell Settupane** **6/23/04**  
Signature of Officer Date  
**Russell Settupane**  
Print or Type Name of Officer  
**Vice President**  
Title of Officer



*Matthew A. Brown, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401.222.3040*

**Filing Period: June 1 - June 30 • Filing Fee: \$20.00**

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. <b>115283</b>	2. Name of Corporation <b>Eastern Allergy Conference, Inc.</b>		
3. State of Incorporation <b>RHODE ISLAND</b>	4. Corporate address in Rhode Island - Street Address <b>95 Pitman Street</b>	City <b>Providence</b>	Zip <b>02906</b>
5. Foreign corporation. Enter principal office address		City	State Zip
6. Principal office address		City	State Zip

6. Brief Description of the character of the affairs which are actually conducted in Rhode Island.

**EDUCATION; FOR PHYSICIANS AND NURSES, UPDATING NEW DEVELOPMENTS IN MEDICINE IN THE ALLERGY FIELD.**

7. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

President Name			Vice President Name		
Guy A. Settignano, M.D.			Russell A. Settignano, M.D.		
Street Address			Street Address		
95 Pitman St.			95 Pitman St.		
City	State	Zip	City	State	Zip
Providence	RI	02906	Providence	RI	02906
Secretary Name			Treasurer Name		
Cliff Tepper, M.D.			Russell A. Settignano, M.D.		
Street Address			Street Address		
215 Washington Ave			95 Pitman St.		
City	State	Zip	City	State	Zip
Albany	NY	12208	Providence	RI	02906

8. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) ☐ FILL IN THE SPACES BEFORE USING ATTACHMENTS  
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23

Director Name Guy A. Settipane, MD			Director Name Russell A. Settipane, MD		
Street Address 95 Pitman Street			Street Address 95 Pitman Street		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906
Director Name Cliff Tepper, MD			Director Name Agile Redmon, MD		
Street Address 215 Washington Avenue			Street Address 5273 Contour Place		
City Albany	State NY	Zip 12208	City Houston	State TX	Zip 77096

9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-78

Agent Name		Address	
GUY A SETTIPANE, M.D.			
Address		City	Zip
95 PITMAN STREET		PROVIDENCE	02906-

*This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee*



\* 1 1 5 2 8 3 \*

**FILED**

File Date \_\_\_\_\_ **FILED**

Check No. NOV 14 2003

By SV 111

FOR SECRETARY OF STATE USE ONLY

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.

*Sgt. J. L. Sweeney*      *6/25/03*

Guy A. Settipane, MD  
Print or Type Name of Officer

Director - President

Filing Fee: \$20.00

To be filed annually during  
the month of June



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State  
Corporations Division  
100 North Main Street Providence, Rhode Island 02903-1335  
Telephone (401) 222-3040

## NON-PROFIT CORPORATION

Corporate ID Number DNP-115283

Annual Report for the year 2002

1. The name of the corporation is Eastern Allergy Conference, Inc.
2. The state or other jurisdiction under the laws of which it is incorporated is RHODE ISLAND
3. The address of the registered office of the corporation in this state is 95 PITMAN STREET PROVIDENCE, RI 02906-  
and the name of its registered agent in this state at that address is GUY A SETTIPANE, M.D.
4. The character of the affairs which it is actually conducting in Rhode Island, briefly stated, is education;  
for physicians and nurses, updating new developments in medicine in  
the allergy field.
5. If a foreign corporation, the address of its principal office in the state or other jurisdiction under the laws of which it is incorporated is n/a
6. Corporate address in Rhode Island 95 Pitman Street, Providence, R.I. 02906
7. Names and addresses of its directors and officers: *(In compliance with 7-6-23 of the R.I.G.L. 1956, as amended, the number of directors of a domestic (Rhode Island) corporation shall not be less than three (3).)*

NAME

OFFICE

ADDRESS

<u>Agile Rdemon, M.D.</u>	Director	<u>5273 Contour Place, Houston, TX 77096</u>
<u>Guy Settipane, M.D.</u>	Director	<u>95 Pitman St, Providence, RI 02906</u>
<u>Russell Settipane, M.D.</u>	Director	<u>95 Pitman St, Providence, RI 02906</u>
<u>Guy Settipane, M.D.</u>	President	<u>95 Pitman Street, Providence, RI 02906</u>
<u>Russell Settipane, M.D.</u>	Vice President	<u>95 Pitman Street, Providence, RI 02906</u>
<u>Cliff Tepper, M.D.</u>	Secretary	<u>215 Washington Avenue, Albany, NY 12208</u>
	Treasurer	

Dated: 6/26/02

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.

Eastern Allergy Conference, Inc.

Exact Name of Corporation

By Guy A. Settipane, M.D.

Title President

(Report must be signed by an officer)

FOR SECRETARY OF STATE USE ONLY

File Date: 7-10-02

Check No.: 1039

By:

Form No. 631  
Revised 5/98

Filing Fee: \$20.00

To be filed annually during  
the month of June



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State  
Corporations Division  
100 North Main Street Providence, Rhode Island 02903-1335  
Telephone (401) 222-3040

## NON-PROFIT CORPORATION

Corporate ID Number DNP-115283

Annual Report for the year 2001

1. The name of the corporation is Eastern Allergy Conference, Inc.
2. The state or other jurisdiction under the laws of which it is incorporated is RHODE ISLAND
3. The address of the registered office of the corporation in this state is 95 PITMAN STREET PROVIDENCE, RI  
02906  
and the name of its registered agent in this state at that address is GUY A SETTIPANE, M.D.
4. The character of the affairs which it is actually conducting in Rhode Island, briefly stated, is education;  
for physicians and nurses, updating new developments in medicine in the allergy field.
5. If a foreign corporation, the address of its principal office in the state or other jurisdiction under the laws of which it is incorporated is n/a
6. Corporate address in Rhode Island 95 Pitman Street, Providence, RI 02906
7. Names and addresses of its directors and officers: *(In compliance with 7-6-23 of the R.I.G.L. 1956, as amended, the number of directors of a domestic (Rhode Island) corporation shall not be less than three (3).)*

NAME	OFFICE	ADDRESS
<u>Guy A. Serripane, MD</u>	<u>Director</u>	<u>95 Pitman Street, Providence, RI 02906</u>
<u>Russell A. Settupane, MD</u>	<u>Director</u>	<u>95 Pitman Street, Providence, RI 02906</u>
<u>Cliff Tepper, MD</u>	<u>Director</u>	<u>215 Washington Avenue, Albany, NY 12208</u>
<u>Agile Redmon, MD</u>	<u>Director</u>	<u>5273 Contour Place, Houston, TX 77096</u>
	<u>Vice-President</u>	
	<u>Secretary</u>	
	<u>Treasurer</u>	

Dated: 6/28/01

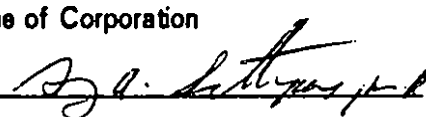
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.



\* 1 1 5 2 8 3 \*

Eastern Allergy Conference, Inc.

Exact Name of Corporation

By Guy A. Settupane, MD   
Title Director

(Report must be signed by an officer)

FOR SECRETARY OF STATE USE ONLY

File Date: 7-5-01

Check No.: 1516

By: Ca

Form No. 631  
Revised 5/98