



**State of Rhode Island
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: 2020

1. Corporate ID No. 000124842

2. Name of Corporation The Rhode Island Quality Institute

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

6

813990

4. Principal Office Address

No. and Street: 50 HOLDEN STREET, SUITE 300

City or Town: PROVIDENCE

State: RI Zip: 02908 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

5. Brief Description of the Character of the Affairs Conducted in Rhode Island

PROVIDE A FORUM FOR THE COMPETITION OVER QUALITY IN HEALTHCARE IN THE STATE OF RHODE ISLAND SEEKING TO IMPROVE HEALTH CARE

6. Names and Addresses of the Officers and Directors:

All Directors and Officers must be listed individually. The number of DIRECTORS of a Rhode Island Corporation shall not be less than 3.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
TREASURER	STEPHEN J. FARRELL	475 KILVERT STREET WARWICK, RI 02886 USA
SECRETARY	STEPHEN J. FARRELL	475 KILVERT STREET WARWICK, RI 02886 USA
PRESIDENT	INDRA NEIL SARKAR PHD	50 HOLDEN STREET, SUITE 300 PROVIDENCE, RI 02908 USA
DIRECTOR	TIMOTHY J. BABINEAU MD	593 EDDY STREET PROVIDENCE, RI 02903 USA
CHAIR	DIANA FRANCHITTO	1085 NORTH MAIN STREET PROVIDENCE, RI 02904 USA
DIRECTOR	MARIE L. GANIM	1511 PONTIAC AVENUE, PASTEUR BLDG CRANSTON, RI 02910 USA
DIRECTOR	JAMES FANALE MD	45 WILLARD AVENUE PROVIDENCE, RI 02905 USA
DIRECTOR	MARIE GHAZAL DNP	655 BROAD STREET PROVIDENCE, RI 02907 USA
DIRECTOR	WOMAZETTA JONES	3 WEST ROAD, VIRKS BLDG CRANSTON, RI 02920 USA
DIRECTOR	PETER M. MARINO	910 DOUGLAS PIKE SMITHFIELD, RI 02917 USA
DIRECTOR	JOSEPH PERRONI	10 CHARLES STREET #3 PROVIDENCE, RI 02904 USA
DIRECTOR	AL PUERINI JR, MD	1150 NEW LONDON AVE, SUITE 20 CRANSTON, RI 02920 USA
DIRECTOR	AARON ROBINSON	100 KENYON AVENUE WAKEFIELD, RI 02879 USA
DIRECTOR	TINA SPEARS	110 JEFFERSON BOULEVARD WARWICK, RI 02888 USA
DIRECTOR	BARBARA WOLFE PHD	39 BUTTERFIELD ROAD, WHITE HALL KINGSTON, RI 02881 USA
DIRECTOR	LAURIE WHITE	30 EXCHANGE TERRACE PROVIDENCE, RI 02908 USA
DIRECTOR	KIM KECK	500 EXCHANGE TERRACE PROVIDENCE, RI 02903 USA
DIRECTOR	JAMES BERSON	44 SHADY COVE ROAD NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	THOMAS CROSWELL	705 MOUNT AUBURN STREET WATERTOWN, MA 02472 USA
DIRECTOR	JACK ELIAS MD	97 WATERMAN STREET PROVIDENCE, RI 02912 USA

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

JEFFREY F. CHASE-LUBITZ, ESQ. BARRETT & SINGAL, P.C. ONE RICHMOND SQUARE, SUITE 165W PROVIDENCE , RI 02906

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

Signed this 10 Day of February, 2021 at 4:54:21 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 HOLLY L. STARK
Signature of Authorized Person

Form No. 631
Revised 09/07

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