



**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

**Foreign Non-Profit  
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:** 2021

**1. Corporate ID No.** 000791702

**2. Name of Corporation** AMERICAN ACADEMY OF FAMILY PHYSICIANS

**3. State of Incorporation**

State: IL

**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

**4. Principal Office Address**

No. and Street: 11400 TOMAHAWK CREEK PKY

City or Town: LEAWOOD

State: KS Zip: 66211 Country: USA

**5. Foreign Corporation. Enter Principal Office Address**

No. and Street: 39000 BOB HOPE DR.

190 V WHITE HALL

City or Town: RANCHO MIRAGE State: CA Zip: 92270 Country: UNI

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

TO CREATE A COMPREHENSIVE STATE HEALTH PLAN

**6. Names and Addresses of the Officers and Directors:**

**All officers and directors must be listed.**

Title	Individual Name	Address

	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	ADA STEWART MD	1313 ASHLAND DR. COLUMBIA, SC 29229 USA
TREASURER	CHARLOTTE KERNER	11400 TOMAHAWK CREEK PARKWAY LEAWOOD, KS 66211 USA
SPEAKER	ALAN SCHWARTZSTEIN MD	753 N MAIN ST. OREGON, WI 53575 US
VP/CIO	MICHAEL SMITH	11400 TOMAHAWK CREEK PKY LEAWOOD, KS 66211 US
CHCO	HOLLY MCCOY	11400 TOMAHAWK CREEK PKY LEAWOOD, KS 66211 US
VICE SPEAKER	RUSSELL KOHL MD	18005 CANTERBURY DR STILWELL, KS 66085 US
PRESIDENT ELECT	STERLING RANSONE MD	16681 GENERAL PULLER HWY DELTAVILLE, VA 23043 USA
CEO/EVP	R. SHAWN MARTIN	11400 TOMAHAWK CREEK PKY LEAWOOD, KS 66211 USA
SVP/GENERAL COUNSEL	HEATHER LEITH	11400 TOMAHAWK CREEK PARKWAY LEAWOOD, KS 66211 USA
NEW PHYSICIAN DIRECTOR	DANIEL CARTER MD	2627 RIVERSIDE AVE. JACKSONVILLE, FL 32204 USA
BOARD CHAIR	GARY LEROY MD	3640 COL GLENN HWY, 190 V WHITE HALL DAYTON, OH 45435 USA
RESIDENT DIRECTOR	ANNA ASKARI MD	39000 BOB HOPE DR. RANCHO MIRAGE, CA 92270 USA
STUDENT DIRECTOR	CYNTHIA CICCOTELLI	1487 LAURIE LN. YARDLEY, PA 19067 USA
SVP	STEPHANIE QUINN	11400 TOMAHAWK CREEK PKY LEAWOOD, KS 66211 USA
SVP	JULIE WOOD MD	11400 TOMAHAWK CREEK PARKWAY LEAWOOD, KS 66211 USA
AUTHORIZED REPRESENTATIVE	SHANNON SCOTT	11400 TOMAHAWK CREEK PARKWAY LEAWOOD, KS 66211 USA
DIRECTOR	JENNIFER BRULL MD	1210 N WASHINGTON ST. SUITE B PLAINVILLE, KS 67663 USA
DIRECTOR	MARY CAMPAGNOLO MD	3242 ROUTE 206 BLDG A BORDENTOWN, NJ 08505 USA
DIRECTOR	TODD SHAFFER MD	7900 LEE'SUMMIT RD. KANSAS CITY, MO 64139 USA
DIRECTOR	JAMES ELLZY MD	3214 10ST ST NE WASHINGTON, DC 20017 US
DIRECTOR	DENNIS GINGRICH MD	500 UNIVERSITY DR. HERSHEY, PA 17033 US
DIRECTOR	TOCHI IROKU-MALIZE MD	17 NORTH MONTGOMERY AVENUE BAY SHORE, NY 11706 US
DIRECTOR	ANDREW CARROLL	333 N DOBSON RD STE 15 CHANDLER, AZ 85224 USA
DIRECTOR	STEVEN FURR	PO BOX 767 JACKSON,, AL 36545 USA
DIRECTOR	MARGOT SAVOY	5 OGDEN CT MEDIA, PA 19063 USA

**Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

NATIONAL REGISTERED AGENTS, INC. 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST  
PROVIDENCE , RI 02914

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

**Signed this 2 Day of June, 2021 at 1:07:38 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 SHANNON SCOTT  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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