



**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: 2021

1. Corporate ID No. 000587411

2. Name of Corporation Rhode Island State Assembly of the Association of Surgical Technologists

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



813920

4. Principal Office Address

No. and Street: P.O. BOX 1534

City or Town: EAST GREENWICH

State: RI

Zip: 02818

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

TO STUDY, DISCUSS, AND EXCHANGE PROFESSIONAL KNOWLEDGE, EXPERTISE, AND IDEAS IN THE FIELD OF SURGICAL TECHNOLOGY. TO PROMOTE A HIGH STANDARD OF SURGICAL TECHNOLOGY PERFORMANCE FOR QUALITY PATIENT CARE. TO STIMULATE INTEREST IN CONTINUING EDUCATION FOR SURGICAL TECHNOLOGISTS.

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
PRESIDENT	DARLENE ROUMANOS	79 COTTAGE ST. PAWTUCKET, RI 02860 USA
TREASURER	JAY BENJAMIN BRADLEY	1808 MINISTERIAL ROAD WAKEFIELD, RI 02879 USA
SECRETARY	LINDA E. DEASLEY	30 SWAN DR. MIDDLETOWN, RI 02842 USA
VICE PRESIDENT	KIMBERLY C. MOSSMAN-YEE	24 OAK WOOD DR. CHARLESTOWN, RI 02813 USA
DIRECTOR	RICARDO F SANTOS	25 TWEED ST PAWTUCKET, RI 02861 USA
DIRECTOR	TRACY A. GODIN	157 OLD COUNTY RD. SMITHFIELD, RI 02917 USA
DIRECTOR	MARC D. SOARES	181 GARDNERS NECK ROAD SWANSEA, MA 02777 USA
DIRECTOR	JOY V.K. LITTLE	51 NELLIE ST. PROVIDENCE, RI 02904 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

TRACY A. GODIN 157 OLD COUNTY ROAD SMITHFIELD , RI 02917

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

Signed this 7 Day of July, 2021 at 10:36:48 AM 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 BEN BRADLEY
Signature of Authorized Person

Form No. 631
Revised 09/07