



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: **2021**

Non-Profit Corporation

→ Filing period: June 1 - June 30

→ Filing Fee: \$20.00

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

RECEIVED
R.I. DEPT. OF STATE
BUS SVCS DIV

1. Entity ID Number 000087899		2. Exact name of the Corporation Wentworth Corporation				2021 JUL 16 A 10:34	
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island To buy, own, sell, mortgage, or lease any interest in real estate and personal property.					
4. NAICS Code 624229 - Other Community H <input type="checkbox"/>							
6. Principal Office Address c/o Gateway Healthcare, 1 Virginia Avenue, Suite 200				City Providence	State RI	Zip 02905	
7. List ALL officers (names and addresses)						Check the box to indicate an attachment <input type="checkbox"/>	
President Name Scott DiChristofero				Vice-President Name			
Street Address Gateway Healthcare, 1 Virginia Avenue, Suite 200				Street Address			
City Providence	State RI	Zip 02905	City	State	Zip		
Secretary Name Pamela S. LaBrecht				Treasurer Name Joseph K. Sabetta			
Street Address 53 Duchess Road				Street Address 10 Weybosset Street, Suite 700			
City Cumberland	State RI	Zip 02864	City Providence	State RI	Zip 02903		
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors.						Check the box to indicate an attachment <input checked="" type="checkbox"/>	
Director Name Robert A. Mancini (Chair)				Director Name Pamela S. LaBrecht (Vice Chair & Secretary)			
Street Address 10 Weybosset Street, Suite 200				Street Address 53 Duchess Road			
City Providence	State RI	Zip 02903	City Cumberland	State RI	Zip 02864		
Director Name Joseph K. Sabetta				Director Name James E. Burdick			
Street Address 10 Weybosset Street, Suite 700				Street Address 77 Gray Street			
City Providence	State RI	Zip 02903	City Warwick	State RI	Zip 02889		
9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641.							
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.							
This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee							
Name of Officer/Authorized Representative Scott DiChristofero						Date 7/9/21	
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

JUL 16 2021
BY Ch CL# 1000 86469

FORM 631 - Revised: 08/2020

Wentworth Corporation
ID #000087899

8. Directors

Michael Furia, Jr. 142 Aldrich Road North Scituate, RI 02857
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David White 1401 Newport Avenue Pawtucket, RI 02861

Nicole M. Corbin, Esq. 10 Weybosset Street, Suite 900 Providence, RI 02903
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Timothy J. Babineau, M.D. 593 Eddy Street Providence, RI 02903
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