



RI SOS Filing Number: 202199410170 Date: 7/16/2021 4:00:00 PM

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.

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R.I. DEPT. OF STATE  
BUS SVCS DIV

2021 JUL 16 A 10 32

1. Entity ID Number <b>000026645</b>		2. Exact name of the Corporation <b>Hospital Properties, Inc.</b>			
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island To engage in charitable activities related to the mission of Lifespan Corporation and its corporate affiliates, including the ownership of properties.			
4. NAICS Code 622110 - General Medical and <input type="checkbox"/>					
6. Principal Office Address 593 Eddy Street			City Providence	State RI	Zip 02903
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Nicholas Dominick, Jr.</b>			Vice-President Name		
Street Address <b>593 Eddy Street</b>			Street Address		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>	City	State	Zip
Secretary Name <b>Paul J. Adler</b>			Treasurer Name <b>Mary A. Wakefield</b>		
Street Address <b>593 Eddy Street</b>			Street Address <b>593 Eddy Street</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>
8. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input checked="" type="checkbox"/></span>					
Director Name <b>Paul J. Adler</b>			Director Name <b>Todd A Conklin</b>		
Street Address <b>593 Eddy Street</b>			Street Address <b>593 Eddy Street</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>
Director Name <b>Nicholas Dominick, Jr.</b>			Director Name <b>Cathy E. Duquette, PhD, RN, NEA-BC, CPHQ,</b>		
Street Address <b>593 Eddy Street</b>			Street Address <b>593 Eddy Street</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>
9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641.					
<b>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.</b>					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee</i>					
Name of Officer/Authorized Representative <b>Paul J. Adler</b>				Date <b>7/9/2021</b>	
Signature of Officer/Authorized Representative 					

FILED

JUL 16 2021

BY 10:30

MAIL TO:  
Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: [www.sos.ri.gov](http://www.sos.ri.gov)

FORM 631 - Revised: 08/2020

**Hospital Properties, Inc.**  
**ID #000026645**

**8. Directors**

Mary A. Wakefield 593 Eddy Street Providence, RI 02903
Timothy J. Babineau, M.D. 593 Eddy Street Providence, RI 02903