



**State of Rhode Island
Office of the Secretary of State**

No Fee

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Domestic Limited Liability Company
Annual Report - Amended**

(Section 7-1.2-1501(e) of the General Laws of Rhode Island, 1956, as amended)

This form is only to be used to amend the current annual report on file with this office.

ANNUAL REPORT YEAR: 2021

1. ID No. 000539865

2. Exact Name of the Limited Liability Company AFFINITY PHYSICIANS, LLC

3. State of Formation

State: RI

ARTICLE III

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

621999

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

PHYSICIAN MEDICAL GROUP

5. Principal Office Address

No. and Street: 4 RICHMOND SQUARE

City or Town: PROVIDENCE

State: RI Zip: 02906 Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: Contact Title:

No. and Street: 4 RICHMOND SQUARE

City or Town: PROVIDENCE

State: RI Zip: 02906 Country: USA

7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.

DO NOT LIST MEMBERS

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
MANAGER	BRYAN LIESE	125 CRYSTAL VIEW DRIVE PASCOAG, RI 02895 USA
MANAGER	METHODIUS TUULI	190 LYNN CIRCLE EAST GREENWICH, RI 02818 USA

MANAGER	KATHERINE MCCLEARY	97 LORING AVENUE PROVIDENCE, RI 02906 USA
MANAGER	ROBERT SHALVOY	19 GOLD STAR DRIVE CUMBERLAND, RI 02864 USA
MANAGER	JINEN THAKKAR MD	455 TOLL GATE ROAD WARWICK, RI 02886 USA
MANAGER	JAMES SULLIVAN MD	345 BLACKSTONE BLVD PROVIDENCE, RI 02906 USA
MANAGER	RONALD CRANDALL	300 RICHMOND STREET PROVIDENCE, RI 02903 USA
MANAGER	CHRISTIE L. DIBBLE	11 JODIE BETH DRIVE EAST GREENWICH, RI 02818 USA
MANAGER	LISA UEBELACKER	17 DEBORAH SAMPSON STREET SHARON, MA 02067 USA
MANAGER	LINDA NANNI	247 CORNELL ROAD WESTPORT, MA 02790 USA
MANAGER	KEVIN BAILL	24 ELTON STREET PROVIDENCE, RI 02906 USA
MANAGER	JEFFREY BORKAN MD	455 TOLL GATE ROAD WARWICK, RI 02886 USA
MANAGER	LAURA OFSTEAD	10 BLAISDELL AVE PAWTUCKET, RI 02860 USA
MANAGER	LAURA FORMAN	332 NORTH QUIDNESSSETT ROAD NORTH KINGSTOWN, RI 02852 USA
MANAGER	RODOLFO GALINATTI	16 RAYMOND DRIVE ATTLEBORO, MA 02703 USA
MANAGER	DEBRA ROBERTS	24 SHORT ROAD BARRINGTON, RI 02806 USA
MANAGER	TANYA BOOKER	181 SESSIONS STREET PROVIDENCE, RI 02906 USA
MANAGER	PAUL DISILVESTRO	62 HOPKINS HILL ROAD EXETER, RI 02822 USA
MANAGER	ANA TUYA FULTON	7 COLD SPRING ROAD BARRINGTON, RI 02806 USA
MANAGER	JAMES FANALE	16 PENNSYLVANIA AVENUE FALMOUTH, MA 02540 USA

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

LISA MUNKELWITZ 455 TOLL GATE ROAD RISK MANAGEMENT DEPT. WARWICK, RI 02886

Signed this 2 Day of November, 2021 at 11:23:07 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 § 7-16.

By JAMES FANALE
Signature of Authorized Person

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