



**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: February 1 - May 1

*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:** 2022

**1. Corporate ID No.** 000142042

**2. Name of Corporation** Scituate Health Alliance

**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

**4. Principal Office Address**

No. and Street: 35 VILLAGE PLAZA WAY

City or Town: NORTH SCITUATE

State: RI

Zip: 02857

Country: USA

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

FUNDRAISING TO PROVIDE FOR A LOCAL HEALTHCARE CLINIC AND HEALTHCARE PROGRAMS FOR THE PEOPLE OF SCITUATE

**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
TREASURER	WENDY MARCHANT	1155 CHOPMIST HILL RD. N. SCITUATE, RI 02857 USA

SECRETARY	SKYE PEACHIE	CENTRAL AVE. N. SCITUATE, RI 02857 USA
VICE PRESIDENT	LYNN BLANCHETTE	5 TALON COURT HOPE, RI 02831 USA
PRESIDENT	JOHN MARCHANT	1155 CHOPMIST HILL ROAD NORTH SCITUATE, RI 02857- USA
DIRECTOR	MICHAEL FINE MD	348 GLEANER CHAPEL ROAD NORTH SCITUATE, RI 02857 USA
DIRECTOR	JOHN MARCHANT	1155 CHOPMIST HILL RD. N. SCITUATE, RI 02857 USA
DIRECTOR	LYNN BLANCHETTE	5 TALON COURT HOPE, RI 02831 USA
DIRECTOR	SKYE PEACHIE	CENTRAL AVE. N. SCITUATE, RI 02857 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**

JOHN MARCHANT 1155 CHOPMIST HILL ROAD NORTH SCITUATE , RI 02857

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

**Signed this 9 Day of March, 2022 at 10:50:51 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 JOHN MARCHANT  
Signature of Authorized Person

Form No. 631  
Revised 09/07