	Schode Island Fee: \$50.00   Secretary of State Fee: \$50.00
Division Of B	Business Services
148 W. F	River Street
Providence I	RI 02904-2615
<b>1636</b> (401) 2	222-3040
Limited Liability Company Annual Report	
Filing Period: February 1 - May 1	
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.	
ANNUAL REPORT YEAR: <u>2023</u>	
1. ID No. <u>000160659</u>	
<b>2. Exact Name of the Limited Liability Company</b> <u>REGENCY HOSPITAL OF RHODE ISLAND,</u> <u>LLC</u>	
3. State of Formation	
State: <u>DE</u>	
ARTICLE III	
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.	
<u>621999</u>	
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island ADMINISTRATIVE	
5. Principal Office Address	
No. and Street: <u>4714 GETTYSBURG ROAD</u> <u>LEGAL</u>	
City or Town: <u>MECHANICSBURG</u>	State: <u>PA</u> Zip: <u>17055</u> Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:	
Contact Name: Contact Title: No. and Street: <u>4714 GETTYSBURG ROAD</u> <u>LEGAL DEPT</u>	
City or Town: MECHANICSBURG	State: PA Zip: 17055 Country: USA

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

CT CORPORATION SYSTEM 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST PROVIDENCE , RI 02914

8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

**Signed this 19 Day of January, 2023 at 11:50:54 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 MICHAEL E TARVIN

Signature of Authorized Person

Form No. 632 Revised 09/07

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