

**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: 2023**1. Corporate ID No.** 001677430**2. Name of Corporation** Foundation For the New England Medical Innovation Center**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

541611**4. Principal Office Address**No. and Street: 150 CHESTNUT STREET
SUTIE CCity or Town: PROVIDENCE State: MA Zip: 02903 Country: USA**5. Brief Description of the Character of the Affairs Conducted in Rhode Island**

SAID CORPORATION IS ORGANIZED EXCLUSIVELY FOR CHARITABLE,
EDUCATIONAL AND/OR SCIENTIFIC PURPOSES, INCLUDED, FOR SUCH PURPOSES,
THE MAKING OF DISTRIBUTIONS TO ORGANIZATIONS THAT QUALIFY AS
EXEMPT ORGANIZATIONS UNDER SECTION 501(C) (3) OF THE INTERNAL REVENUE
CODE, OR CORRESPONDING SECTION OF ANY FURTHER FEDERAL TAX CODE.

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
DIRECTOR	AIDAN J PETRIE	1005 FORT GETTY ROAD JAMESTOWN, RI 02835 USA
DIRECTOR	LYDIA D SCHROTER	7 TYLER ROAD UPTON, MA 01568 USA
DIRECTOR	HOPE HOPKINS	150 CHESTNUT STREET, SUTIE C PROVIDENCE, RI 02903 USA
DIRECTOR	MICHAEL PEREIRA	150 CHESTNUT STREET PROVIDENCE, RI 02903 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

AIDAN J. PETRIE 1005 FORT GETTY ROAD JAMESTOWN , RI 02835

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

Signed this 31 Day of January, 2023 at 2:12:12 PM 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 LYDIA SCHROTER
Signature of Authorized Person

Form No. 631
Revised 09/07

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