



**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.** 000150365

**2. Name of Corporation** Ocean State Adult Immunization Coalition

**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

622110

**4. Principal Office Address**

No. and Street: 588 WOLCOTT AVENUE

City or Town: MIDDLETOWN

State: RI

Zip: 02842

Country: USA

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

TO REDUCE MORTALITY AND MORBIDITY ASSOCIATED WITH VACCINE-  
PREVENTABLE DISEASES AMOUNG ADULTS THROUGH MEDICAL PROVIDER  
INITIATIVES, DEVELOPMENT AND IMPLEMENTATION OF PUBLIC EDUCATION  
IMMUNIZATION CAMPAIGNS

**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.**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
DIRECTOR	DONNA B DUBE	52 POUND RD CUMBERLAND, RI 02864 USA
DIRECTOR	SUSAN M SHEPARDSON	450 ROCK ST, UNIT 9 FALL RIVER, MA 02720 USA
PRESIDENT	RICHARD WILLIAM RADEBACH	588 WOLCOTT AVENUE MIDDLETOWN, RI 02842 USA
DIRECTOR	RICHARD WILLIAM RADEBACH	588 WOLCOTT AVENUE MIDDLETOWN, RI 02842 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**

RICHARD W RADEBACH 2077 EAST MAIN ROAD PORTSMOUTH , RI 02871

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

**Signed this 19 Day of April, 2023 at 11:05:25 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 RICHARD RADEBACH  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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