

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

Foreign Non-Profit 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 - ENTER THE CURRENT FILING YEAR **2023**: 2023

- 1. Corporate ID No. 001689646
- 2. Name of Corporation Ascension Health-IS, Inc.
- 3. State of Incorporation

State: MO

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 <u>click here.</u>

NAICS Code

541513

4. Principal Office Address

No. and Street: 4600 EDMUNDSON ROAD

City or Town: ST. LOUIS State: MO Zip: 63134 Country: USA

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

INFORMATION SUPPORT SERVICES

6. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country

PRESIDENT	EDUARDO CONRADO	4600 EDMUNDSON ROAD
		ST. LOUIS, MO 63134 USA
TREASURER	MATTHEW JAGGER	102 WOODMONT BLVD, SUITE 600
		· · · · · · · · · · · · · · · · · · ·
		NASHVILLE, TN 37205 USA
SECRETARY	JENNA MIHM	4600 EDMUNDSON ROAD
		ST. LOUIS, MO 63134 USA
CHAIR	CHRISTINE K. MCCOY	4600 EDMUNDSON ROAD
		ST. LOUIS, MO 63134 USA
DIRECTOR	CHRISTINE K. MCCOY	4600 EDMUNDSON ROAD
		ST. LOUIS, MO 63134 USA
DIRECTOR	MATTHEW JAGGER	102 WOODMONT BLVD, SUITE 600
		i
		NASHVILLE, TN 37205 USA
DIRECTOR	JENNA MIHM	4600 EDMUNDSON ROAD
		ST. LOUIS, MO 63134 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

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

Signed this 1 Day of May, 2023 at 12:07:32 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 JENNA MIHM

Signature of Authorized Person

Form No. 631 Revised 09/07

© 2007 - 2023 State of Rhode Island All Rights Reserved