RI SOS Filing Number: 202335561160 Date: 5/11/2023 1:23:00 PM



State of Rhode Island

Department of State - Business Services Division

R.I. CEPT. OF STATE BUS SVCS DIV

Annual Report for the year: Non-Profit Corporation

2006

2023 格AY IT PH 1: 17

-> Filing period: February 1 - May 1

→ Filing Fee: \$20.00

-> Penalty: Additional \$25.00 fee if form is not filed by May 31.

1, Entity ID Number	2. Exact name of the Corporation NORTHERN RHODE ISLAND UNITED				
000/20575	NURSES + ALLIED PROFESSIONALS LOCAL SOLT, INC.				
3. State of Incorporation	Brief description of the character of business conducted in Rhode Island				
RI	UNION BUSINESS ABVOCATING FOR HOSPITAL				
4. NAICS Code	PATIENTS BY NULSES				
813930					
6 Principal Office Address			City	State	Zip
501 GREAT ROAD, UNIT 204			NORTH SMITHFIELD	RI	02896
7. List ALL officers (names and addresses) Check the box to indicate an attachment					
President Name SEE ATTACHED LISTING			Vice-President Name		
Street Address			Street Address		
City	State	Zip	City	State	Žip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors.					
Director Name			Check the box to indicate an attachment L. Director Name		
Streel Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641.					
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.					
This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.					
Name of Officer/Authorized Representative					
MARIA MONIZ 5/8/2					
Signature of Officer/Authorized Representative					
MAY 11 2023					

MAIL TO: Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov BY & STW5J 1:23

ENTITY ID NUMBER: 0001205 75

Officer Term/Position
Officer +i+le / Dirt(+or for all Listed
below

President Jan Peso

11 Country Way, North Smithfield, RI 02896

Senior Vice President Nina Rotatori

124 Lambert Ave., Woonsocket, RI 02895

Treasurer Patricia Hazebrouck

202 Thayer St., Millville, MA 01529

Vice President Carol Franz

22 Esek Hopkins Ln., Cumberland, RI 02644

Vice President Joseph Azar

8 Fair Oaks Drive, Lincoln, RI 02865

Vice President Roland Constantineau

99 Providence St., Woonsocket, RI 02895

Vice President Diane King

273 Oregon Ave., Woonsocket, RI 02895