



**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 - ENTER THE CURRENT FILING YEAR 2023: 2023

1. Corporate ID No. 000124842

2. Name of Corporation The Rhode Island Quality Institute

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

813990

4. Principal Office Address

No. and Street: 315 IRON HORSE WAY
SUITE 102

City or Town: PROVIDENCE State: RI Zip: 02908 Country: USA

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

PROVIDE A FORUM FOR THE COMPETITION OVER QUALITY IN HEALTHCARE IN THE STATE OF RHODE ISLAND SEEKING TO IMPROVE HEALTH CARE

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
TREASURER	BARBARA WOLFE PHD	39 BUTTERFIELD ROAD KINGSTON, RI 02881 USA
SECRETARY	BARBARA WOLFE PHD	39 BUTTERFIELD ROAD KINGSTON, RI 02881 USA
PAST CHAIR	DIANA FRANCHITTO	1085 NORTH MAIN STREET PROVIDENCE, RI 02904 USA
PRESIDENT	INDRA NEIL SARKAR PHD	50 HOLDEN STREET, SUITE 300 PROVIDENCE, RI 02908 USA
CHAIR	PETER M MARINO	910 DOUGLAS PIKE SMITHFIELD, RI 02917 USA
DIRECTOR	PATRICK TIGUE	1511 PONTIAC AVE, BLDG 69-1 CRANSTON, RI 02920 USA
DIRECTOR	RICHARD GAMACHE	40 IRVING AVE EAST PROVIDENCE, RI 02914 USA
DIRECTOR	MARIE GHAZAL DNP	655 BROAD STREET PROVIDENCE, RI 02907 USA
DIRECTOR	WOMAZETTA JONES	3 WEST ROAD, VIRKS BLDG CRANSTON, RI 02920 USA
DIRECTOR	JOSEPH PERRONI	10 CHARLES STREET #3 PROVIDENCE, RI 02904 USA
DIRECTOR	AARON ROBINSON	100 KENYON AVENUE WAKEFIELD, RI 02879 USA
DIRECTOR	JAMES BERSON	44 SHADY COVE ROAD NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	JEANNE LACHANCE	171 SERVICE AVE, SUITE 330 WARWICK, RI 02886 USA
DIRECTOR	STEVEN LAMPERT MD	167 POINT ST, SUITE 2B PROVIDENCE, RI 02903 USA
DIRECTOR	NOAH BENEDICT	1150 NEW LONDON AVE, SUITE 100 CRANSTON, RI 02920 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

JEFFREY F. CHASE-LUBITZ, ESQ. HUSCH BLACKWELL, LLP ONE RICHMOND SQUARE, SUITE 165W PROVIDENCE , RI 02906

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

Signed this 12 Day of May, 2023 at 11:36:27 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 HOLLY STARK
Signature of Authorized Person

Form No. 631
Revised 09/07

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