



State of Rhode Island  
Department of State - Business Services Division

Annual Report for the year: 2022

Non-Profit Corporation \_\_\_\_\_

- Filing period: February 1 - May 1
- Filing Fee: \$20.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

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1. Entity ID Number <b>000074941</b>		2. Exact name of the Corporation <b>Spectrum Health Systems, Inc.</b>			
3. State of Incorporation <b>Massachusetts</b>		5. Brief description of the character of business conducted in Rhode Island <b>Drug and alcohol treatment, prevention and educations, ancillary treatment services, research evaluation and program development</b>			
4. NAICS Code <b>622210</b>					
6. Principal Office Address <b>10 Mechanic Street, Suite 302</b>			City <b>Worcester</b>	State <b>MA</b>	Zip <b>01608</b>
7. List ALL officers (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. Check the box to indicate an attachment <input checked="" type="checkbox"/>					
President Name <b>Kurt A. Isaacson</b>			Vice-President Name <b>Verilyn Mitchell</b>		
Street Address <b>16 Bay Farm Road</b>			Street Address <b>42 Summit Street</b>		
City <b>South Grafton</b>	State <b>MA</b>	Zip <b>01560</b>	City <b>Clinton</b>	State <b>MA</b>	Zip <b>01510</b>
Secretary Name <b>Susan Suchocki-Brown</b>			Treasurer Name <b>Michael Procopio</b>		
Street Address <b>11 Whipple Road</b>			Street Address <b>9 vinegar Hill Drive</b>		
City <b>Kittery</b>	State <b>ME</b>	Zip <b>03904</b>	City <b>Saugus</b>	State <b>MA</b>	Zip <b>01906</b>
8. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. Check the box to indicate an attachment <input checked="" type="checkbox"/>					
Director Name <b>John Renner</b>			Director Name <b>Brian Garrity</b>		
Street Address <b>11 Brddock Park #A</b>			Street Address <b>6 Talbot Road</b>		
City <b>Boston</b>	State <b>MA</b>	Zip <b>02116</b>	City <b>Hingham</b>	State <b>MA</b>	Zip <b>02043</b>
Director Name <b>Brenda Jenkins</b>			Director Name <b>Jeroan Allison</b>		
Street Address <b>13 Benefit Street</b>			Street Address <b>15 Westland Street</b>		
City <b>Worcester</b>	State <b>MA</b>	Zip <b>01610</b>	City <b>Worcester</b>	State <b>MA</b>	Zip <b>01602</b>
9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641.					
<b>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.</b>					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>					
Name of Officer/Authorized Representative <b>Kurt A. Isaacson</b>				Date <b>7/13/2023</b>	
Signature of Officer/Authorized Representative <u>Kurt Isaacson</u>					

MAIL TO:  
Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: www.sos.ri.gov

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**Additional Officers**

Name	Home
Andrew Salmon	5 Bella Rosa Drive Millbury, MA 01527
a. Chairperson	
Garth Johnson	71 School Street Shrewsbury, MA 01545
e. Assistant Secretary	

**Additional Directors**

Name	Home
David Felper	61 Magill Drive Grafton, MA 01519
s. Trustee	
Cheryl Gallant	28 Whispering Pine Circle Worcester, MA 01606
u. Trustee	
James Celestin	70 Larchwood Drive Cambridge, MA 02138
v. Trustee	