	State of Rhode Island Office of the Secretary of State	No Fee
	Division Of Business Services	
	148 W. River Street	
1426	Providence RI 02904-2615	
7030	(401) 222-3040	
Domestic Non-Pro Annual Report - A Filing Period: Februa	mended	
	.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to within the time prescribed by law (R.I.G.L. 7-6-91) is subject 25.00.	
This form is o	only to be used to amend the current annual report on file with this office	<del>)</del> .
ANNUAL REPORT Y	'EAR: <u>2023</u>	
1. Corporate ID No.	000028103	
2. Name of Corpora	ation <u>SEVEN HILLS RHODE ISLAND, INC.</u>	
	NAICS CODE	
primary type of activ populate a NAICS C	labeled NAICS Code below, select the classification title that describes th vity in which your entity engages. The box to the right of the dropdown will ode based on the chosen selection. If the NAICS Code is known, enter it in further assistance with selecting a classification <u>click here.</u>	l
NAICS Code		1
<u>624120</u>		-
3. State of Incorpor	ration	
State: <u>RI</u>		
4. Corporate Addres	ss in Rhode Island	
No. and Street:	1 ALBION RD	
City or Town:	<u>SUITE 201</u> <u>LINCOLN</u> State: <u>RI</u> Zip: <u>02865</u> Country: <u>USA</u>	
6. Brief Description	of the Character of the Affairs Which are Actually Conducted in Rhode	Island
<u>SHELTERED WOR</u> DISABILITIES	RKSHOPS AND RESIDENCES FOR PERSONS WITH DEVELOPME	<u>NTAL</u>
7. Names and Addro	esses of the Officers and Directors:	
All officers and di	irectors must be listed. If officers and/or directors have been elected, t	he title

## Incorporator is no longer applicable; please delete

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L.

7-6-23

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
DIRECTOR	DR. CAROL B DONNELLY	81 HOPE AVE WORCESTER, MA 01603 USA
SECRETARY/CLERK	DEBORAH J NEEDLEMAN	81 HOPE AVE WORCESTER, MA 01603 USA
TREASURER	RAYMOND L QUINLAN	81 HOPE AVE WORCESTER, MA 01603 USA
DIRECTOR	DAVID K WOODBURY	81 HOPE AVE WORCESTER, MA 01603 USA
DIRECTOR	DAVID E. SIMON	81 HOPE AVE WORCESTER, MA 01603 US
VICE CHAIR	DR. TAMMY MURRAY	81 HOPE AVE WORCESTER, MA 01603 USA
DIRECTOR	PETER STANTON	81 HOPE AVE WORCESTER, MA 01603 US
DIRECTOR	MARIANNE E. ROGERS	81 HOPE AVE WORCESTER, MA 01603 US
DIRECTOR	FRANCES POLITO	81 HOPE AVE WORCESTER, MA 01603 US
DIRECTOR	DR. DAVID PAYDARFAR	81 HOPE AVE WORCESTER, MA 01603 US
DIRECTOR	MAUREEN F. BINIENDA	81 HOPE AVE WORCESTER, MA 01603 US
PRESIDENT	DR. DAVID JORDAN	81 HOPE AVE WORCESTER, MA 01603 USA
MEMBER-AT-LARGE	ROBERT L MAHAR	81 HOPE AVE WORCESTER, MA 01603 USA
MEMBER AT LARGE	JOHN N ALTOMARE ESQ.	81 HOPE AVE WORCESTER, MA 01603 USA
CHAIR	DR. CHARLES P CONROY	81 HOPE AVE WORCESTER, MA 01603 USA
DIRECTOR	DR. CATHERINE JONES	81 HOPE AVE WORCESTER, MA 01603 USA

8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

<u>CT CORPORATION SYSTEM</u> <u>450 VETERANS MEMORIAL PARKWAY, SUITE 7A</u> <u>EAST</u> <u>PROVIDENCE</u>, <u>RI 02914</u>

**Signed this 6 Day of September, 2023 at 9:25:33 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 <u>NANCY ACTON</u> Signature of Authorized Person

Form No. 631 Revised 09/07

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