RI SOS Filing Number: 202445793620 Date: 2/7/2024 8:04:00 AM



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 YEAR 2024: 2024

- 1. Corporate ID No. 000074579
- 2. Name of Corporation The Rhode Island Public Health Foundation
- 3. State of Incorporation

State: RI

NAICS CODE

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

<u>923120</u>

4. Principal Office Address

No. and Street: 7 CENTRAL STREET

City or Town: PROVIDENCE State: RI Zip: 02907 Country: USA

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

TO ASSIST THE RI DEPT OF HEALTH IN OBTAINING AND EXPEDITINGCOMPETITIVE PUBLIC HEALTH RESEARCH, DEVELOPMENT, PROJECTS.

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
PRESIDENT	MARK TRACY	39 CHAPIN ROAD BARRINGTON, RI 02806 USA
TREASURER	PETER COSTA	27 OLD CHIMNEY RD BARRINGTON, RI 02806 USA
VICE PRESIDENT	GUILLAUME BAGAL	755 WESTMINSTER STREET, UNIT 202 PROVIDENCE, RI 02903 USA
EX OFFICIO	AMY NUNN	PO BOX 6088 PROVIDENCE, RI 02904 USA
DIRECTOR	ELIZABETH ZIMA	23 CORREIA DRIVE PORTSMOUTH, RI 02871 USA
DIRECTOR	JENNIFER TOMASIK	PARK SQ 31 JAMES AVE-STE 720 BOSTON, MA 02116 USA
DIRECTOR	LEONARD GREEN MPH	17 DRUID ROAD WARWICK, RI 02888 USA
DIRECTOR	MELISSA SANZARO	100 BROAD ST PROVIDENCE, RI 02903 USA
DIRECTOR	JEAN TAPLEY	50 AMICA WAY LINCOLN, RI 02685 USA
DIRECTOR	TERRIE WETLE PHD	121 SOUTH MAIN STREET PROVIDENCE, RI 02912 USA
DIRECTOR	PETER CORRIANDER	PO BOX 6088 PROVIDENCE, RI 02904 USA
DIRECTOR	AMY GOLDFARB	PO BOX 6088 PROVIDENCE, RI 02904 USA
DIRECTOR	RICHARD DEFILIPPO	99 DELWAY RD EAST PROVIDENCE, RI 02902 USA
DIRECTOR	JOSEPH MOLINA FLYNN	58 SPOONER AVE WARWICK, RI 02886 USA
DIRECTOR	SANDRA POWELL	3 CAPITOL HILL, RI 02908 USA
DIRECTOR	LISA CARCIERI	910 DOUGLAS PIKE SMITHFIELD, RI 02917 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

DON E. WINEBERG ONE PARK ROW, SUITE 300 PROVIDENCE, RI 02903

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

Signed this 7 Day of February, 2024 at 8:08:27 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 LYNNE MALONE
Signature of Authorized Person

Form No. 631 Revised 09/07

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