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

Foreign Non-Profit 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. 001723069

2. Name of Corporation Harbor Health Services, Inc.

3. State of Incorporation

State: MA

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 click here.

NAICS Code
622110

4. Principal Office Address

No. and Street: 1135 MORTON STREET
City or Town: MATTAPAN State: MA Zip: 02126 Country: USA

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

A FEDERALLY QUALIFIED HEALTH CENTER OPERATING IN MASSACHUSETTS

6. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country

PRESIDENT	CHARLES T. JONES	2 PINSONNAULT LANE N. ATTLEBORO, MA 02760 USA
CFO	KRISTOPHER TODD MURPHY	29 SEA FLOWER LANE MARSHFIELD, MA 02050 USA
CLERK	JAN MATTIMOE	240 PEARL STREET, UNIT 415 SOMERVILLE, MA 02145 USA
CHAIR	PATRICK PRESTON	104 OLD MEETING HOUSE ROAD EAST FALMOUTH, MA 02536 USA
VICE CHAIR	MAURA DOYLE	168 MILTON STREET DORCHESTER, MA 02124 USA
TREASURER	JOHN O'HARA	89 BIRDS HILL AVENUE NEEDHAM, MA 02492 USA
DIRECTOR	QUEENETTE SANTOS	24 GRANDA PARK APT 4 BOSTON, MA 02119 USA
DIRECTOR	KUSH BADSHAH	354 HARRISON AVE APT 1499 BOSTON, MA 02118 USA
DIRECTOR	JOE GREENE	18 GREENGATE PLYMOUTH, MA 02360 USA
DIRECTOR	MICHAEL MECENAS	191 WINTER STREET HYANNIS, MA 02601 USA
DIRECTOR	LEON DAVID	632 WEST PARK STREET DORCHESTER, MA 02124 USA
DIRECTOR	THINH NGUYEN	20 TILESTON STREET, PH5 BOSTON, MA 02113
DIRECTOR	ANNIE LE	1 CHARLES ST. SOUTH, UNIT 6E BOSTON, MA 02116 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

CT CORPORATION SYSTEM 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST PROVIDENCE , RI 02914

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

Signed this 4 Day of March, 2024 at 1:34:36 PM 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 MATTHEW LAPOINTE
Signature of Authorized Person

Form No. 631
Revised 09/07

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