

State of Rhode Island Department of State - Business Services Division

Annual Report for the year: 2024 **Non-Profit Corporation**

→ Filing period February 1 - May 1

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→ Filing Fee: \$20.00 → Penalty: Additional \$25.00 fee if		3.5 3.5						
1. Entity ID Number 000028569	Exact name of the Corporation The Miriam Hospital							
Phode Island		on of the character of business conducted in Rhode Island erect, acquire, equip, transact, and maintain a hospital for the						
4. NAICS Code 622110 - General Medicl	sick, disable	d, and injured						
6. Principal Office Address 164 Summit Avenue			City Providence	State RI	Zip 02906			
7. List ALL officers (names and add			Check the box to indicate an attachment 🗹					
President Name Maria P. Ducha		I,NEA-BC	Vice-President Name					
Street Address 164 Summit Av			Street Address					
City Providence	State RI	^{Zip} 02906	City	State	Zip			
Secretary Name Paul J. Adler			Treasurer Name Peter Markell					
Street Address 167 Point Street, Suite 2B			Street Address 167 Point Street, Suite 2B					
City Providence	State RI	^{Zip} 02903	City Providence	State RI	Z ₁ 0 02903			
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment								
Director Name Lawrence Aubin	, Sr. (Chair)		Director Name Peter Capodilupo (Vice Chair)					
Street Address 1460 Fall River			Street Address 345 Thames Street, N207					
City Seekonk	State MA	^{Zip} 02771	^{City} Bristol	State RI	Zip UŽOUS			
Director Name Alan Litwin (Vice	e Chair)		Director Name John Fernandez CEO&Pres Lifespan					
Street Address 951 North Main			Street Address 167 Point Street					
^{City} Providence	State RI	^{Zip} 02904	^{City} Providence	State RI	Zip 02903			
9. The Registered Agent information	n of record with the	e RI Department o	f State is accurate. Changes require	e filing Form 641.				
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.								
This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.								
Name of Officer/Authorized Representation	Date							
Paul J. Adler 2/26/2024								
Signature of Officer/Acthorized Rep	resentative		FILED					
			04/\V 4/0004					

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov MAR 1 4 2024 BY ML 100101281

The Miriam Hospital J ID #000028569

8. Directors

Emanuel Barrows Bank RI One Turks Head Place Providence, RI 02903 Roger Begin F.L. Putnam Investment Co., 10 Weybosset Street, Suite 302 Providence, RI 02903 **Chris Cocks** President & CEO Hasbro, Inc. 1027 Newport Avenue Pawtucket, RI 02861 Sarah T. Dowling 50 Park Row West #216 Providence, RI 02903 Edward Feldstein, Esq. Roberts Carroll Feldstein & Peirce, Inc. 10 Weybosset Street, Suite 800 Providence, RI 02903 Ziya Gokaslan, M.D. **Neurosurgery LPG** 593 Eddy Street Providence, RI 02903 Michael Hanna, CPA 271 Wordens Pond Road Wakefield, RI 02879 Phillip Kydd 40 Metcalf Street Warwick, RI 02888 Martha Mainiero, M.D. **Rhode Island Hospital** Department of Diagnostic Imaging 593 Eddy Street Providence, RI 02903 Paula McNamara 91 Main Street, Ste 118 Warren, RI 02885 Janet Robinson 95 Webster Street Newport, RI 02840 Lawrence Sadwin 18 Oyster Point Warren, RI 02885 Shivan Subramaniam 155 Grotto Avenue Providence, RI 02906

Angel Tavares
Adler Pollock & Sheehan, P.C.
One Citizens Plaza, 8th Floor
Providence, RI 02903

The Miriam Hospital ID #000028569

8. Directors

P2