RI SOS Filing Number: 202450910920 Date: 4/12/2024 11:40:00 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. 000124842
- 2. Name of Corporation The Rhode Island Quality Institute
- 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

813990

4. Principal Office Address

No. and Street: 315 IRON HORSE WAY

SUITE 102

City or Town: PROVIDENCE State: RI Zip: 02908 Country: USA

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

PROVIDE A FORUM FOR THE COMPETITION OVER QUALITY IN HEALTHCARE IN THE STATE OF RHODE ISLAND SEEKING TO IMPROVE HEALTH CARE

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	INDRA NEIL SARKAR PHD	315 IRON HORSE WAY, SUITE 102 PROVIDENCE, RI 02908 USA
TREASURER	JEANNE LACHANCE	171 SERVICE AVE WARWICK, RI 02886 USA
SECRETARY	JEANNE LACHANCE	171 SERVICE AVENUE WARWICK, RI 02886 USA
CHAIR	PETER M MARINO	910 DOUGLAS PIKE SMITHFIELD, RI 02917 USA
DIRECTOR	RICHARD GAMACHE	40 IRVING AVE EAST PROVIDENCE, RI 02914 USA
DIRECTOR	MARIE GHAZAL DNP	655 BROAD STREET PROVIDENCE, RI 02907 USA
DIRECTOR	JOSEPH PERRONI	10 CHARLES STREET #3 PROVIDENCE, RI 02904 USA
DIRECTOR	AARON ROBINSON	100 KENYON AVENUE WAKEFIELD, RI 02879 USA
DIRECTOR	JAMES BERSON	44 SHADY COVE ROAD NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	NOAH BENEDICT	1150 NEW LONDON AVE, SUITE 100 CRANSTON, RI 02920 USA
DIRECTOR	RICHARD CHAREST	3 WEST ROAD CRANSTON, RI 02920 USA
DIRECTOR	TIMOTHY ARCHER	185 ASYLUM ST HARTFORD, CT 06103 USA
DIRECTOR	PHILIP BARR	1 WELLNESS WAY CANTON, MA 02021 USA
DIRECTOR	CORY KING	1511 PONTIAC AV, BLDG 69-1 CRANSTON, RI 02920 USA
DIRECTOR	DIANA FRANCHITTO	1085 NORTH MAIN STREET PROVIDENCE, RI 02904 USA
DIRECTOR	MUKESH JAIN MD	222 RICHMOND STREET PROVIDENCE, RI 02903 USA
DIRECTOR	MICHAEL SOUZA	115 CASS AVENUE WOONSOCKET, RI 02895 USA
DIRECTOR	PATRICK VIVIER MD, PHD	555 LOWER COLLEGE ROAD KINGSTON, RI 02881 USA
DIRECTOR	MICHAEL WAGNER	4 RICHMOND SQUARE PROVIDENCE, RI 02906 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

HOLLY L. STARK 315 IRON HORSE WAY SUITE 102 PROVIDENCE, RI 02908

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

Signed this 12 Day of April, 2024 at 11:43:06 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 **HOLLY STARK**

Signature of Authorized Person

Form No. 631 Revised 09/07

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