



**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.** 001706294

**2. Name of Corporation** Children's Heart Foundation

**3. State of Incorporation**

State: IL

**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

813410

**4. Principal Office Address**

No. and Street: 5 REVERE DR

SUITE 200

City or Town: NORTHBROOK State: IL Zip: 60062 Country: USA

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

TO FUND THE MOST PROMISING RESEARCH TO ADVANCE THE DIAGNOSIS,  
TREATMENT AND PREVENTION OF CONGENITAL HEART DEFECTS

**6. Names and Addresses of the Officers and Directors:**

**All officers and directors must be listed.**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	GAIL RODDIE-HAMLIN	5 REVERE DR, SUITE 200 NORTHBROOK, IL 60062 USA
TREASURER	JIM BOLOTIN	5 REVERE DR, SUITE 200 NORTHBROOK, IL 60062 USA
SECRETARY	LORI JONES	5 REVERE DR, SUITE 200 NORTHBROOK, IL 60062 USA
DIRECTOR	KEVIN SLAWIN	5 REVERE DR, SUITE 200 NORTHBROOK, IL 60062 USA
DIRECTOR	SALLY POWERS	5 REVERE DR, SUITE 200 NORTHBROOK, IL 60062 USA
DIRECTOR	KELLY WITTICH	5 REVERE DR, SUITE 200 NORTHBROOK, IL 60062 USA
DIRECTOR	JIM BOLOTIN	5 REVERE DR, SUITE 200 NORTHBROOK, IL 60062 USA
DIRECTOR	WILLIAM ROACH	5 REVERE DR, SUITE 200 NORTHBROOK, IL 60062 USA
DIRECTOR	LORI JONES	5 REVERE DR, SUITE 200 NORTHBROOK, IL 60062 USA
DIRECTOR	DANIELLE PRADAS	5 REVERE DR, SUITE 200 NORTHBROOK, IL 60062 USA
DIRECTOR	JOHN COSTELLO	5 REVERE DR, SUITE 200 NORTHBROOK, IL 60062 USA
DIRECTOR	TAMARA THOMAS	5 REVERE DR, SUITE 200 NORTHBROOK, IL 60062 USA
DIRECTOR	KATHRYN OSTEEN	5 REVERE DR, SUITE 200 NORTHBROOK, IL 60062 USA
DIRECTOR	TAWANNA WILLIAMS	5 REVERE DR, SUITE 200 NORTHBROOK, IL 60062 USA
DIRECTOR	JASON YOUNG	5 REVERE DR, SUITE 200 NORTHBROOK, IL 60062 USA
DIRECTOR	NANCY GHANAYEM	5 REVERE DR, SUITE 200 NORTHBROOK, IL 60062 USA
DIRECTOR	WILLIAM LYMAN	5 REVERE DR, SUITE 200 NORTHBROOK, IL 60062 USA
DIRECTOR	MATTHEW SCHOENHOLTZ	5 REVERE DR, SUITE 200 NORTHBROOK, IL 60062 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 23 Day of April, 2024 at 9:49:09 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 KELLY LETTMANN

Signature of Authorized Person

Form No. 631  
Revised 09/07

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