



**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.** 000036143

**2. Name of Corporation** Rhode Island Society of Eye Physicians and Surgeons

**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 [click here](#).

NAICS Code

813920

**4. Principal Office Address**

No. and Street: 225 DYER STREET, 2ND FLOOR

City or Town: PROVIDENCE

State: RI Zip: 02903 Country: USA

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

NONPROFIT ORGANIZATION FOR OPHTHALMOLOGISTS PROMOTING  
EDUCATION

**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	Address
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	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	SALVATORE LAPORCHIO	225 DYER STREET, 2ND FLOOR PROVIDENCE, RI 02903 USA
EXECUTIVE DIRECTOR	ALI WALZ	405 PROMENADE STREET, SUITE A PROVIDENCE, RI 02908 USA
TREASURER	BRIAN SAVOIE	405 PROMENADE STREET, SUITE A PROVIDENCE, RI 02908 USA
DIRECTOR	PHILIP R RIZZUTO MD	120 DUDLEY STREET PROVIDENCE, RI 02908 US
DIRECTOR	MICHAEL MIGLIORI MD	235 PROMENADE STREET, SUITE 500 PROVIDENCE, RI 02908 USA
DIRECTOR	DAVID RIVERA MD	405 PROMENADE STREET, SUITE A PROVIDENCE, RI 02908 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**

STACY PATERNO 405 PROMENADE STREET, SUITE A 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 16 Day of May, 2024 at 8:50:29 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 STACY PATERNO  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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