	State of Rh Office of the Se		ate	Fee: \$20.00
	Division Of Bu	siness Services	5	
	148 W. R	ver Street		
	Providence R	I 02904-2615		
1636	(401) 22	22-3040		
Foreign Non-Profit				
Annual Report				
Filing Period: February 1 - Ma	iy 1			
In accordance with R.I.G.L. 7 annual report within the time p penalty fee of \$25.00.				
ANNUAL REPORT YEAR - EI	NTER THE CURRENT YE	AR 2024 : <u>202</u>	24	
1. Corporate ID No. 000	<u>117859</u>			
2. Name of Corporation <u>Acc</u>	cessia Health			
3. State of Incorporation				
State: <u>VA</u>				
NAICS CODE				
Using the dropdown labeled primary type of activity in wh populate a NAICS Code base box on the right. For further a	ich your entity engages ed on the chosen selecti	The box to the	right of the dro Code is know	opdown will
NAICS Code				
813219				
4. Principal Office Address				
No. and Street: 3104 E B	OUNDARY COURT			
City or Town: <u>MIDLO</u>		State: <u>VA</u>	Zip: <u>23112</u>	Country: <u>USA</u>
5. Brief Description of the Character of the Affairs Conducted in Rhode Island				
TO COLLECT AND DISTRIBUTE INFORMATION REGARDING HEMOPHILIA AND				
OTHER				
CATASTROPHIC DISORI	<u>DERS</u>			
6. Names and Addresses of the Officers and Directors:				
All officers and directors must be listed.				
1				

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	TIARA GREEN	3104 E BOUNDARY COURT MIDLOTHIAN, VA 23112 USA
TREASURER	RUSSELL E PHILLIPS JR.	3104 E. BOUNDARY COURT MIDLOTHIAN, VA 23112 USA
DIRECTOR	LUD KIMBROUGH	3104 E BOUNDARY COURT MIDLOTHIAN, VA 23112 USA
DIRECTOR	BRIAN L FINK	3104 EAST BOUNDARY COURT MIDLOTHIAN, VA 23112 USA
DIRECTOR	MITCH MULA	3104 E. BOUNDARY COURT MIDLOTHIAN, VA 23112 USA
DIRECTOR	BRIAN LANDRY	3104 E. BOUNDARY COURT MIDLOTHIAN, VA 23112 USA
DIRECTOR	LEE SMITH	3104 E BOUNDARY CT MIDLOTHIAN, VA 23112 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

CORPORATION SERVICE COMPANY 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI 02888

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 May, 2024 at 8:34:51 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 <u>TIARA GREEN</u>

Signature of Authorized Person

Form No. 631 Revised 09/07

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