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## 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**: <u>2024</u>

- 1. Corporate ID No. 001674012
- 2. Name of Corporation Brown Physicians, Inc.
- 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

<u>621111</u>

4. Principal Office Address

No. and Street: 110 ELM STREET

City or Town: PROVIDENCE State: RI Zip: 02903 Country: USA

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

THE CORPORATION SHALL SUPPORT THE TEACHING AND RESEARCH ACTIVITIES OF THE WARREN ALPERT MEDICAL SCHOOL OF BROWN UNIVERSITY.

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 |
|-------|-----------------|---------|
|       |                 |         |

|                       | First, Middle, Last, Suffix | Address, City or Town, State, Zip Code, Country |
|-----------------------|-----------------------------|---|
| PRESIDENT             | ANGELA M. CALIENDO MD, PHD. | 110 ELM STREET<br>PROVIDENCE, RI 02903 USA      |
| TREASURER             | LOUIS B. RICE MD            | 110 ELM STREET<br>PROVIDENCE, RI 02903 USA      |
| DIRECTOR EX-OFFICIO   | ANGELA M. CALIENDO MD, PHD. | 110 ELM STREET<br>PROVIDENCE, RI 02903 USA      |
| DIRECTOR              | GYAN PAREEK MD              | 110 ELM STREET<br>PROVIDENCE, RI 02903 USA      |
| DIRECTOR              | MUKESH JAIN MD              | 110 ELM STREET<br>PROVIDENCE, RI 02903 USA      |
| DIRECTOR              | KIMBERLY A. GALLIGAN MBA    | 110 ELM STREET<br>PROVIDENCE, RI 02903 USA      |
| AT LARGE BOARD MEMBER | ANDREW BLUM MD              | 110 ELM STREET<br>PROVIDENCE, RI 02903 USA      |
| AT LARGE BOARD MEMBER | ANTHONY NAPOLI MD           | 110 ELM STREET<br>PROVIDENCE, RI 02903 USA      |
| SECRETARY             | KAREN FURIE MD              | 110 ELM STREET<br>PROVIDENCE, RI 02903 USA      |
| DIRECTOR              | LINDA BROWN MD              | 110 ELM STREET<br>PROVIDENCE, RI 02903 USA      |
| AT LARGE BOARD MEMBER | SU-JEAN SEO MD, PHD         | 110 ELM STREET<br>PROVIDENCE, RI 02903 USA      |
| CHAIR                 | MUKESH JAIN MD              | 110 ELM STREET<br>PROVIDENCE, RI 02903 USA      |
| DIRECTOR              | ABRAR QURESHI MD            | 110 ELM STREET<br>PROVIDENCE, RI 02903 USA      |
| DIRECTOR              | KAREN L. FURIE MD           | 110 ELM STREET<br>PROVIDENCE, RI 02903 USA      |
| DIRECTOR              | LOUIS B. RICE MD            | 110 ELM STREET<br>PROVIDENCE, RI 02903 USA      |
| DIRECTOR              | WILLIAM G. CIOFFI MD        | 110 ELM STREET<br>PROVIDENCE, RI 02903 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

<u>SUSAN LEACH DEBLASIO, ESQUIRE</u> <u>ADLER POLLOCK & SHEEHAN P.C.</u> <u>1 CITIZENS PLAZA, 8TH FLOOR PROVIDENCE</u>, <u>RI 02903</u>

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

Signed this 31 Day of May, 2024 at 1:49:31 PM 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 SUSAN LEACH DEBLASIO, ESQUIRE
Signature of Authorized Person

Form No. 631
Revised 09/07

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