

**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 2025: 2025**1. Corporate ID No.** 000030474**2. Name of Corporation** WOOD RIVER HEALTH SERVICES, 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 [click here](#).

NAICS Code

813990**4. Principal Office Address**No. and Street: 823 MAIN STREETCity or Town: HOPE VALLEYState: RIZip: 02832Country: USA**5. Brief Description of the Character of the Affairs Conducted in Rhode Island**PRIVATE NOT FOR PROFIT HEALTHCARE**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
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DIRECTOR	CHRISTINE BEDOYA	1821 LAWTON FOSTER RD NORTH HOPE VALLEY, RI 02832 USA
DIRECTOR	FRANCIS HOPKINS	222 BUCKEYE BROOK RD CHARLESTOWN, RI 02813 USA
TREASURER	JOE REDDISH	23 COREY TRAIL WYOMING , RI 02898 USA
SECRETARY	JESSE SARGENT	49 ASHAWAY RD WESTERLY, RI 02891 USA
PAST CHAIR	DAN MAKIN	120 CEDAR LANE GRISWOLD, CT 06351 USA
DIRECTOR	FRAN HINTEREGGER	823 MAIN STREET HOPE VALLEY, RI 02832 USA
DIRECTOR	RUTH MORGAN	275 WOODVILLE ROAD ASHAWAY, RI 02804 USA
DIRECTOR	KATE PORTER	823 MAIN STREET HOPE VALLEY, RI 02832 USA
PAST CHAIR	REGAN PENNYPACKER	132 KENWOOD RD GRISWOLD, CT 06351 USA
VICE CHAIR	JOHN S PAYNE	NORTH DRIVE WESTERLY, RI 02891 USA
CHAIR	KALPESH SHAH	823 MAIN ST HOPE VALLEY, RI 02832 USA
DIRECTOR	GREG KENNEY	271 SPRING ST ROCKVILLE, RI 02873 USA
DIRECTOR	MICAH M MCCARTEN	4640C OLD POST RD CHARLESTOWN, RI 02813 USA
DIRECTOR	KEITH SWABY	137 SOUTHERN WAY CHARLESTOWN, RI 02813 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**

ALISON CROKE 823 MAIN STREET HOPE VALLEY , RI 02832

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

Signed this 13 Day of January, 2025 at 1:44:11 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 ALISON CROKE, PRESIDENT & CEO
Signature of Authorized Person

Form No. 631
Revised 09/07

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