



**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 2025: 2025

1. Corporate ID No. 001681441

2. Name of Corporation American Society of Health-System Pharmacists, Inc. (ASHP)

3. State of Incorporation

State: MD

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: 4500 EAST-WEST HIGHWAY
SUITE 900

City or Town: BETHESDA State: MD Zip: 20814 Country: USA

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

TO ADVANCE AND SUPPORT THE PROFESSIONAL PRACTICE OF PHARMACISTS IN HOSPITALS AND HEALTH SYSTEMS

6. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
CFO,SENIOR VICE PRESIDENT	JOHN HEBERLEIN	4500 EAST-WEST HIGHWAY, SUITE 900 BETHESDA, MD 20814 USA
CHIEF COMPLIANCE OFFICER,GENERAL COUNSEL	PAULA TIEDEMANN	4500 EAST-WEST HIGHWAY, SUITE 900 BETHESDA, MD 20814 USA
DIRECTOR,CEO,SECRETARY	PAUL W. ABRAMOWITZ	4500 EAST-WEST HIGHWAY, SUITE 900 BETHESDA, MD 20814 USA
DIRECTOR	MELANIE A. DODD	4500 EAST-WEST HIGHWAY, SUITE 900 BETHESDA, MD 20814 USA
DIRECTOR	VIVIAN BRADLEY JOHNSON	4500 EAST-WEST HIGHWAY, SUITE 900 BETHESDA, MD 20814 USA
DIRECTOR	VICKIE L. POWELL	4500 EAST-WEST HIGHWAY, SUITE 900 BETHESDA, MD 20814 USA
DIRECTOR	JENNIFER E. TRYON	4500 EAST-WEST HIGHWAY, SUITE 900 BETHESDA, MD 20814 USA
DIRECTOR	KIM W. BENNER	4500 EAST-WEST HIGHWAY, SUITE 900 BETHESDA, MD 20814 USA
DIRECTOR	NISHAMINY KASBEKAR	4500 EAST-WEST HIGHWAY, SUITE 900 BETHESDA, MD 20814 USA
DIRECTOR	PAMELA K. PHELPS	4500 EAST-WEST HIGHWAY, SUITE 900 BETHESDA, MD 20814 USA
DIRECTOR	PAUL C. WALKER	4500 EAST-WEST HIGHWAY, SUITE 900 BETHESDA, MD 20814 USA
DIRECTOR	CHRISTINE M. JOLOWSKY	4500 EAST-WEST HIGHWAY, SUITE 900 BETHESDA, MD 20814 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 21 Day of February, 2025 at 5:00:30 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 EMILY MARCHIO
Signature of Authorized Person

Form No. 631
Revised 09/07

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