State of Rhode Island
Office of the Secretary of State

Fee: $50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Foreign Business Corporation Annual Report

Filing Period: February 1 - May 1

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of $25.00.

ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2025: 2025

1. Corporate ID No. 000551797

2. Name of Corporation Northeast Pharmacy Service Corporation

3. Street Address Principal Business Office:

No. and Street: 1661 WORCESTER ROAD, SUITE 405
City or Town: FRAMINGHAM State: MA Zip: 01701 Country: USA

4. Business Phone No.

508-875-1866

5. State of Incorporation

State: MA

NAICS CODE

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here. More information on NAICS can be found online.

561110

6. Brief Description of the Character of Business Conducted in Rhode Island

SERVICES RELATED TO THE ADMINISTRATION OF A PHARMACY NETWORK WITH LOCATIONS
IN RHODE ISLAND

7. 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
PRESIDENT	PATRICIA MONACO	124 BENNETT RD EAST HAVEN, CT 06513 USA
TREASURER	JOHN GROSSOMANIDES	153 HIGH ST WESTERLY, RI 02891 USA
VICE CHAIRMAN	DOUG PISANO	4 DOLE PLACE WEST NEWBURY, MA 01949 USA
CHAIRMAN	TIMOTHY FENSKY	58 ALAN ROAD MARLBOROUGH, MA 01752 USA
DIRECTOR	JEFF MALONE	2506 N. MT. JULIET MT. JULIET, TN 37122 USA
DIRECTOR	SHANE SAVAGE	66 WESTERN AVE FAIRFIELD, MA 04937 USA
DIRECTOR	LAKS PUDIPEDDI	978 EAST MAIN ST BRIDGEPORT, CT 06608 USA
DIRECTOR	LARISSA HUBBARD	51 HERITAGE HILL ROAD WINDHAM, NH 03087 USA
DIRECTOR	JOHN CROCE	13 PROSPECT POINT LANE CLIFTON PARK, NY 12065 USA
DIRECTOR	NICK RODER-HANNA	14 VALLEYVIEW LANE COLLINSVILLE, CT 06019 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares *Number of Shares*	Total Issued and Outstanding *Num of Shares*
STK		$0.0000	13.00	0

9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

Signed this 6 Day of March, 2025 at 2:47:58 PM. *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 corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By CATHY ORAM, CFO

Signature of Authorized Representative of the Corporation

Form No. 630
Revised 09/07