



**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.** 001711346

**2. Name of Corporation** PUBLIC HEALTH INSTITUTE

**3. State of Incorporation**

State: CA

**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

541611

**4. Principal Office Address**

No. and Street: 555 12TH STREET  
SUITE 600

City or Town: OAKLAND State: CA Zip: 94607 Country: USA

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

TO IMPROVE THE PUBLICS HEALTH IN THE UNITED STATES AND GLOBALLY  
THROUGH RESEARCH, TRAINING AND PROFESSIONAL EDUCATION

**6. Names and Addresses of the Officers and Directors:**

**All officers and directors must be listed.**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
DIRECTOR	SARAH DASH	1225 19TH ST., STE 710 WASHINGTON, DC 20036 USA
DIRECTOR	PAUL HALVERSON	1050 WISHARD BLVD., FL 5&6 INDIANAPOLIS, IN 46202 USA
SECRETARY-TREASURER	SANTIAGO MUNOZ	757 WESTWOOD PLAZA, STE 1320 LOS ANGELES, CA 90095 USA
PAST CHAIR	DARA JOHNSON TRESEDER	ONE MARKET, STE 500 SAN FRANCISCO, CA 94105 USA
CHAIR	PAUL KUEHNERT	76 MIDDLE ST. HALLOWELL, ME 04347 USA
VICE CHAIR	AFIA ASAMOAH	2021 FILLMORE ST., STE 1059 SAN FRANCISCO, CA 94115 USA
DIRECTOR	RADHA MUTHIAH	4900 PUERTO RICO AVE NE WASHINGTON, DC 20017 USA
DIRECTOR	STEPHANIE LEDESMA	409 BIRCHWOOD DR. MORAGA, CA 94556 USA
DIRECTOR	ELIZABETH HERNANDEZ	5469 KEARNY VILLA ROAD, SUITE 2000 SAN DIEGO, CA 92123 USA
DIRECTOR	EMILY HENKE	C/O VIDA 9400 SW BEAVERTON HILLSDALE HWY #250 BEAVERTON, OR 97005 USA
DIRECTOR	ELIZABETH CUERVO TILSON	1305 COLLEGE PLACE RALEIGH, NC 27605 USA
DIRECTOR	ANDREW PINES	555 12TH ST., STE 600 OAKLAND, CA 94607 USA
DIRECTOR	SERGIO AGUILAR-GAXIOLA	2921 STOCKTON BLVD., STE 1408 1408 SACRAMENTO, CA 95817 USA
DIRECTOR	MELISSA STAFFORD JONES	555 12TH ST., STE 600 OAKLAND, CA 94607 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**

REGISTERED AGENT SOLUTIONS, INC. 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 25 Day of April, 2025 at 6:04:03 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 B. MÉLANGE MATTHEWS

Signature of Authorized Person

Form No. 631  
Revised 09/07

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