

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. 000029985
- 2. Name of Corporation Rhode Island Dental Association
- 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>813910</u>

4. Principal Office Address

No. and Street: <u>875 CENTERVILLE ROAD</u>

BUILDING 4, SUITE 12

City or Town: WARWICK State: RI Zip: 02886 Country: USA

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

TO PROMOTE THE ART AND SCIENCE OF DENTISTRY AND TO FAVOR THE HEALTH AND WELFARE OF OUR PATIENTS.

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
PRESIDENT	FOTINI DIONISOPOULOS	1090 NEW LONDON AVE CRANSTON, RI 02920 USA
TREASURER	NIMA BEHAZIN	4959 TOWER HILL ROAD WAKEFIELD, RI 02879 USA
VICE PRESIDENT	GAYATHRI SHENOY	417 ANGELL STREET PROVIDENCE, RI 02906 USA
EXECUTIVE DIRECTOR	AARON GUCKIAN	875 CENTERVILLE ROAD WARWICK, RI 02886 USA
DIRECTOR	ANDREW GAZERRO	1425 MAIN STREET WEST WARWICK, RI 02893 USA
DIRECTOR	NIMA BEHAZIN	4959 TOWER HILL ROAD WAKEFIELD, RI 02879 USA
DIRECTOR	FOTINI DIONISOPOULOS	1090 NEW LONDON AVE CRANSTON, RI 02920 USA
DIRECTOR	GAYATHRI SHENOY	417 ANGELL STREET PROVIDENCE, RI 02906 USA
DIRECTOR	FREDERICK HARTMAN	600 WAMPANOAG TRAIL EAST PROVIDENCE, RI 02915 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

AARON GUCKIAN 875 CENTERVILLE ROAD, BUILDING 4, SUITE 12 WARWICK, RI 02886

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

Signed this 30 Day of June, 2025 at 1:09:13 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 <u>ELIZABETH LAMOUREUX</u>

Signature of Authorized Person

Form No. 631 Revised 09/07

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