RI SOS Filing Number: 202577875900 Date: 8/27/2025 4:03:00 PM



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**: <u>2025</u>

- 1. Corporate ID No. <u>001716166</u>
- 2. Name of Corporation The Children's Hospital Corporation
- 3. State of Incorporation

State: MA

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>622110</u>

4. Principal Office Address

No. and Street: 300 LONGWOOD AVENUE

City or Town: BOSTON State: MA Zip: 02115 Country: USA

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

TO PROVIDE MEDICAL AND SURGICAL CARE AND TREATMENT TO INFANTS, CHILDREN, ADOLESCENTS AND YOUNG ADULTS.

6. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country

DDEC:DEVE	KEWALD OUR DOWN THE TOTAL	
PRESIDENT	KEVIN B CHURCHWELL, MD	300 LONGWOOD AVENUE BOSTON, MA 02115 USA
TREASURER	DOUG VANDERSLICE	300 LONGWOOD AVENUE BOSTON, MA 02115 USA
CLERK	CHRIS VINEY	300 LONGWOOD AVENUE BOSTON, MA 02115 USA
CHAIRMAN	DOUGLAS BERTHIAUME	300 LONGWOOD AVENUE BOSTON, MA 02115 USA
DIRECTOR	JAMES MANDELL, MD	300 LONGWOOD AVENUE BOSTON, MA 02115 USA
DIRECTOR	KEVIN CHURCHWELL, MD	300 LONGWOOD AVENUE BOSTON, MA 02115 USA
DIRECTOR	WENDY CHUNG	300 LONGWOOD AVENUE BOSTON, MA 02115 USA
DIRECTOR	PETER LAUSSEN	300 LONGWOOD AVENUE BOSTON, MA 02115 USA
DIRECTOR	IVOR HORN	300 LONGWOOD AVENUE BOSTON, MA 02115 USA
DIRECTOR	STEVE KRICHMAR	300 LONGWOOD AVENUE BOSTON, MA 02115 USA
DIRECTOR	KATHLEEN REGAN	300 LONGWOOD AVENUE BOSTON, MA 02115 USA
DIRECTOR	RALPH MARTIN	300 LONGWOOD AVENUE BOSTON, MA 02115 USA
DIRECTOR	TED PAPPENDICK	300 LONGWOOD AVENUE BOSTON, MA 02115 USA
DIRECTOR	ROBERT SMITH	300 LONGWOOD AVENUE BOSTON, MA 02115 USA
DIRECTOR	ALISON TAUNTON-RIGBY	300 LONGWOOD AVENUE BOSTON, MA 02115 USA
DIRECTOR	THOMAS MELENDEZ	300 LONGWOOD AVENUE BOSTON, MA 02115 USA
DIRECTOR	ROBERT LANGER	300 LONGWOOD AVENUE BOSTON, MA 02115 USA
DIRECTOR	GARY FLEISHER	300 LONGWOOD AVENUE BOSTON, MA 02115 USA
DIRECTOR	WINSTON HENDERSON	300 LONGWOOD AVENUE BOSTON, MA 02115 USA
DIRECTOR	LISA WIELAND	300 LONGWOOD AVENUE BOSTON, MA 02115 USA
DIRECTOR	STEVEN FISHMAN	300 LONGWOOD AVENUE BOSTON, MA 02115 USA
DIRECTOR	MARK PROCTOR	300 LONGWOOD AVENUE BOSTON, MA 02115 USA
DIRECTOR	DOUG BERTHIAUME	300 LONGWOOD AVENUE BOSTON, MA 02115 USA
DIRECTOR	ALLAN BUFFERD	300 LONGWOOD AVENUE BOSTON, MA 02115 USA
ļ		5001011, NIA 02110 00A

DIRECTOR	STEPHEN KARP	300 LONGWOOD AVENUE BOSTON, MA 02115 USA
DIRECTOR	VIVIAN LEE	300 LONGWOOD AVENUE BOSTON, MA 02115 USA
DIRECTOR	GARY LOVEMAN	300 LONGWOOD AVENUE BOSTON, MA 02115 USA
DIRECTOR	LAURA WOOD	300 LONGWOOD AVENUE BOSTON, MA 02115 USA
DIRECTOR	HARVEY LODISH	300 LONGWOOD AVENUE BOSTON, MA 02115 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

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

Signed this 27 Day of August, 2025 at 4:08:00 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 **DOUG VANDERSLICE, TREASURER**

Signature of Authorized Person

Form No. 631 Revised 09/07

© 2007 - 2025 State of Rhode Island All Rights Reserved