State of Rhode Island
Office of the Secretary of State

No Fee

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

Domestic Non-Profit Annual Report - Amended

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 the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of $25.00.

This form is only to be used to amend the current annual report on file with this office.

ANNUAL REPORT YEAR: 2025

1. Corporate ID No. 001704570

2. Name of Corporation Coastal Medical Physicians, Inc.

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
622110

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 15 LASALLE SQUARE
City or Town: PROVIDENCE State: RI Zip: 02903 Country: USA

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

THE CORPORATION IS ORGANIZED AND SHALL BE OPERATED EXCLUSIVELY FOR CHARITABLE, SCIENTIFIC AND EDUCATIONAL PURPOSES WITHIN THE MEANING OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE OF 1986, AS AMENDED (THE CODE). THE CORPORATION IS FURTHER ORGANIZED TO PROVIDE ACCOUNTABLE PATIENT-CENTERED, HIGH QUALITY, EFFICIENT, VALUE BASED AND INNOVATIVE CARE TO SERVE THE HEALTH CARE NEEDS OF THE

COMMUNITIES IN RHODE ISLAND AND ELSEWHERE, INCLUDING THOSE SERVED BY THE HOSPITALS AFFILIATED WITH LIFESPAN CORPORATION (LIFESPAN), AND TO PROMOTE AND ADVANCE MEDICAL RESEARCH, EDUCATION AND TRAINING IN MEDICINE, MEDICAL RELATED SCIENCES AND CLINICAL PRACTICE. IN ELABORATION OF SUCH MISSION, THE CORPORATION IS ESTABLISHED FOR THE BENEFIT OF AND TO SUPPORT THE TEACHING, RESEARCH AND PATIENT CARE MISSIONS OF RHODE ISLAND HOSPITAL (RIH), THE MIRIAM HOSPITAL (TMH), OTHER LIFESPAN AFFILIATED HOSPITALS, AND THE ALPERT MEDICAL SCHOOL OF BROWN UNIVERSITY. RIH, TMH, AND SUCH OTHER LIFESPAN AFFILIATED HOSPITALS ARE REFERRED TO COLLECTIVELY AS THE HOSPITALS. IN FURTHERANCE OF AND NOT IN LIMITATION OF THE FOREGOING PURPOSES, THE CORPORATION MAY ENGAGE IN ANY OTHER LAWFUL ACTIVITY THAT MAY BE CARRIED OUT BY A CORPORATION FORMED UNDER SECTION 7-6 OF THE GENERAL LAWS OF RHODE ISLAND, AS NOW WRITTEN OR HEREAFTER AMENDED, WHICH IS NOT INCONSISTENT WITH SECTION 501(C)(3) OF THE CODE, AND THE RULES AND REGULATIONS PROMULGATED THEREUNDER

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	EDWARD MCGOOKIN M.D.	3 RIVER MEADOW DRIVE HOPE VALLEY , RI 02832 USA
TREASURER	PETER MARKELL	15 LASALLE SQUARE PROVIDENCE, RI 02903 USA
DIRECTOR	G. DEAN ROYE M.D.	593 EDDY STREET PROVIDENCE, RI 02903 USA

8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

PAUL J. ADLER 15 LASALLE SQ PROVIDENCE , RI 02903

Signed this 19 Day of September, 2025 at 12:52:22 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 PAUL J. ADLER
Signature of Authorized Person

Form No. 631
Revised 09/07

State of Rhode Island
Department of State | Office of the Secretary of State
Gregg M. Amore, *Secretary of State*

I, GREGG M. AMORE, Secretary of State of the State of Rhode Island, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

September 19, 2025 12:51 PM

Gregg M. Amore
Secretary of State