RI SOS Filing Number: 202332438690 Date: 4/6/2023 10:56:00 AM



State of Rhode Island Office of the Secretary of State

Division Of Business Services 148 W. River Street Fee: \$20.00

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: 2023

- 1. Corporate ID No. <u>001731131</u>
- 2. Name of Corporation Family Health International
- 3. State of Incorporation

State: NC

ARTICLE III

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

541715

4. Principal Office Address

No. and Street: 359 BLACKWELL STREET, SUITE 200

City or Town: <u>DURHAM</u> State: <u>NC</u> Zip: <u>27701</u> Country: <u>USA</u>

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

INTERNATIONAL DELIVERY OF DEVELOPMENT SERVICES IN THE FIELD OF HEALTH AND NUTRITION

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 |

| CFO | RASIKA J. PADMAPERUMA | 359 BLACKWELL STREET, SUITE 200 DURHAM, NC 27701 USA |
|--|----------------------------|--|
| CHIEF COMPLIANCE OFFICER | SEAN TEMEEMI | 359 BLACKWELL STREET, SUITE 200, DURHAM, NC 27701 USA |
| CHIEF OPERATING OFFICER | DEBORAH K. KENNEDY-IRAHETA | 359 BLACKWELL STREET, SUITE 200 DURHAM, NC 27701 USA |
| GENERAL COUNSEL AND SECRETARY | M. KATHERINE STROKER | 359 BLACKWELL STREET, SUITE 200 DURHAM, NC 27701 USA |
| CHIEF SCIENCE OFFICER | TIMOTHY MASTRO | 359 BLACKWELL STREET, SUITE 200 DURHAM, NC 27701 USA |
| ASSISTANT SECRETARY | ELIZABETH J. MEADOWS | 359 BLACKWELL STREET, SUITE 200 DURHAM, NC 27701 USA |
| ASSISTANT SECRETARY | SUSAN THIGPEN CARLSON | 359 BLACKWELL STREET, SUITE 200 DURHAM, NC 27701 USA |
| ASSISTANT SECRETARY | KRISTEN G. LINGO | 359 BLACKWELL STREET, SUITE 200 DURHAM, NC 27701 USA |
| CHIEF EXECUTIVE OFFICER & DIRECTOR | TESSIE SAN MARTIN | 359 BLACKWELL STREET, SUITE 200 DURHAM, NC 27701 USA |
| ACTING CHIEF HUMAN RESOURCES OFFICER | USEETHA RHODES | 359 BLACKWELL STREET, SUITE 200 DURHAM, NC 27701 USA |
| CHAIR, FHI 360 BOARD OF DIRECTORS & DIRECTOR | CARLOS J. TORRES | 359 BLACKWELL STREET, SUITE 200 DURHAM, NC 27701 USA |
| VICE CHAIR, FHI 360 BOARD OF DIRECTORS & DIRECTOR | WARREN SIMMONS | 53 LINCOLN AVENUE PROVIDENCE, RI 02906 USA |
| DIRECTOR | H.E. KAMISSA CAMARA | 359 BLACKWELL STREET, SUITE 200 DURHAM, NC 27701 USA |
| DIRECTOR | DANA S. HOVIG | 359 BLACKWELL STREET, SUITE 200 DURHAM, NC 27701 USA |
| DIRECTOR | SHEILA T. LEATHERMAN | 359 BLACKWELL STREET, SUITE 200 DURHAM, NC 27701 USA |
| DIRECTOR | SCOTT W. WU | 359 BLACKWELL STREET, SUITE 200 DURHAM, NC 27701 USA |
| DIRECTOR | SUSAN A. YASHAR | 359 BLACKWELL STREET, SUITE 200 DURHAM, NC 27701 USA |
| DIRECTOR | DEBREWORK Y. ZEWDIE | 53 LINCOLN AVENUE PROVIDENCE, RI 02906 USA |
| DIRECTOR | ARON BETRU | 9913 HOLMHURST ROAD BETHESDA, MD 20817 USA |
| DIRECTOR | JACQUELINE J. MAHAL | 258 RIVERSIDE DRIVE, #12A NEW YORK, NY 10025 USA |
| DIRECTOR | GREGORY M. GUNN | 86 6TH AVENUE BROOKLYN, NY 11217 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

 $\underline{\text{CORPORATE CREATIONS NETWORK INC.}} \ \underline{\text{10 DORRANCE STREET \#700}} \ \underline{\text{PROVIDENCE}} \ , \ \underline{\text{RI}} \ \underline{\text{02903}}$

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

Signed this 6 Day of April, 2023 at 10:58:12 AM 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 M. KATHERINE STROKER

Signature of Authorized Person

Form No. 631 Revised 09/07

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