



State of Rhode Island
Department of State - Business Services Division

FILED

Annual Report for the year: 2024

Corporation _____

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

MAR 25 2024
BY 4300

| | | | | | |
|---|--------------------|--|---|--|---|
| 1. Entity ID Number 1668575 | | 2. Exact name of the Corporation First Circle, Inc. | | | |
| 3. Principal Office Address 10 Charles Street | | | City Providence | State RI | Zip 02904 |
| 4. NAICS Code 524298 | | 6. Brief description of the character of business conducted in Rhode Island Dental industry services | | | |
| 5. State of Incorporation Rhode Island | | | | | |
| 7. List ALL officers (names and addresses) | | | | | Check the box to indicate an attachment <input checked="" type="checkbox"/> |
| President Name Blaine Carroll | | | Vice-President Name n/a | | |
| Street Address 10 Charles Street | | | Street Address | | |
| City Providence | State RI | Zip 02904 | City | State | Zip |
| Secretary Name William R. Landry, Esq. | | | Treasurer Name Richard A. Fritz | | |
| Street Address 30 Exchange Terrace | | | Street Address 10 Charles Street | | |
| City Providence | State RI | Zip 02903 | City Providence | State RI | Zip 02904 |
| 8. List ALL directors (names and addresses) | | | | | Check the box to indicate an attachment <input checked="" type="checkbox"/> |
| Director Name Thomas P. Enright, DMD | | | Director Name John T. Ruggieri | | |
| Street Address 1052 Main Street | | | Street Address 173 Mathewson Road | | |
| City Warren | State RI | Zip 02885 | City Barrington | State RI | Zip 02806 |
| Director Name Christine Gadbois | | | Director Name Jonathan W. Hall | | |
| Street Address 400 Massasoit Ave.; Suite 113 | | | Street Address 3 Reverie Lane | | |
| City East Providence | State RI | Zip 02914 | City Lincoln | State RI | Zip 02865 |
| 9. Shares Authorized | | 10. Shares Issued | | Check the box to indicate an attachment <input type="checkbox"/> | |
| This information is currently of record in the Department of State. Changes require an additional filing. | | NUMBER OF SHARES | | CLASS/SERIES | |
| | | 1,000 | | STK | |
| | | | | PAR VALUE | |
| | | | | \$1.0000 | |
| 11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee. | | | | | |
| Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct. | | | | | |
| Name of Authorized Representative William R. Landry | | | | | Date 03/21/24 |
| Signature of Authorized Representative | | | | | |

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

Attachment to 2024 Annual Report

7. **Officers (cont.)**

Assistant Secretary Melissa Gennari
10 Charles Street
Providence, RI 02903

Assistant Treasurer Duane Easter
10 Charles Street
Providence, RI 02903

FILED
MAR 25 2024
BY 43002
DS

8. **Director (cont.)**

Peter C. Hayes
146 Westminster Street
Providence, RI 02903

Junior Jabbic
582 Great Road, Suite 101
North Smithfield, RI 02896

Colin P. Kane
20 Newman Ave., - Ste 1005
Rumford, RI 02916

Marc A. Paulhus
One Citizens Plaza, 12th Fl
Providence, RI 02904

Michael F. Sabitoni
410 South Main Street
Providence, RI 02903

Heather A. Provino
461 Main Street – Suite A
East Greenwich, RI 02818

Edwin J. Santos
825 Chalkstone Avenue
Providence, RI 02908

James V. Rosati
One Beacon Centre
Warwick, RI 02886

Mark A. Shaw
40 Van Wickle Lane
Bristol, RI 02809

Steven Issa
40 Westminster Street
Providence, RI 02903

Elizabeth L. Catucci
6 Blackstone Valley Place
Lincoln, RI 02865