

2013 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000003020

Entity Name: RHODE ISLAND HOSPITAL FOUNDATION INC.**Current Principal Place of Business:**593 EDDY STREET
PROVIDENCE, RI 02903**Current Mailing Address:**167 POINT STREET
SUITE 2B
PROVIDENCE, RI 02903**FEI Number:** 05-0468736**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	CHAIRMAN
Name	COLLIS, ELLEN A
Address	233 RUMSTICK POINT ROAD
City-State-Zip:	BARRINGTON RI 02806

Title	VC
Name	FLEMING, RALPH V JR.
Address	PO BOX 4192
City-State-Zip:	EAST PROVIDENCE RI 02914

Title	TREASURER
Name	COLLIS, ELLEN A
Address	233 RUMSTICK POINT ROAD
City-State-Zip:	BARRINGTON RI 02806

Title	SECRETARY
Name	FLEMING, RALPH V JR.
Address	PO BOX 4192
City-State-Zip:	EAST PROVIDENCE RI 02914

Title	PRESIDENT
Name	BABINEAU, TIMOTHY J M.D.
Address	593 EDDY STREET
City-State-Zip:	PROVIDENCE RI 02903

Title	TRUSTEE
Name	WEISS, DIANE N
Address	1500 SOUTH OCEAN BOULEVARD, APT 1601
City-State-Zip:	BOCA RATON FL 33432

Title	TRUSTEE
Name	AUBIN, LAWRENCE A SR.
Address	AUBIN CORPORATION 1460 FALL RIVER AVENUE SUITE 11
City-State-Zip:	SEEKONK MA 02771

Title	TRUSTEE
Name	BEGIN, ROGER N.
Address	15 RIVERSIDE DRIVE
City-State-Zip:	WAKEFIELD RI 02879

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: TIMOTHY J. BABINEAU, M.D.**PRESIDENT****04/23/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title TRUSTEE
Name CARR, JAMES L JR.
Address H. CARR AND SONS, INC.
P.O. BOX 9088
City-State-Zip: PROVIDENCE RI 02940

Title TRUSTEE
Name D'AMBRA, MICHAEL
Address D'AMBRA CONSTRUCTION CO. INC.
800 JEFFERSON BOULEVARD SUITE 1
City-State-Zip: WARWICK RI 02886

Title TRUSTEE
Name FISCHER, EDWIN G. M.D.
Address 8 HALIDON AVENUE
City-State-Zip: NEWPORT RI

Title TRUSTEE
Name HAFFENREFFER MORAN, KRISTEN
Address 71 CATLIN AVENUE
City-State-Zip: RUMFORD RI 02916

Title TRUSTEE
Name JOUKOWSKY, MICHAEL W.
Address 99 POWER STREET
City-State-Zip: PROVIDENCE RI 02906

Title TRUSTEE
Name MARCAURELE, JOSEPH J.
Address THE WASHINGTON TRUST COMPANY
10 WEYBOSSET STREET SUITE 101
City-State-Zip: PROVIDENCE RI 02903

Title TRUSTEE
Name PERIK, ELIZABETH J.
Address 10 HIGH STREET
City-State-Zip: JAMESTOWN RI 02835

Title EX-OFFICIO
Name CUMMINGS, MARK T
Address LIFESPAN CORPORATION
139 POINT STREET
City-State-Zip: PROVIDENCE RI 02903

Title TRUSTEE
Name DREW, THOMAS M M.D.
Address 101 PRATT STREET
City-State-Zip: PROVIDENCE RI 02906

Title TRUSTEE
Name HANDY, EDWARD O. III
Address RBS CITIZENS FINANCIAL GROUP,
INC.
ONE CITIZENS PLAZA
City-State-Zip: PROVIDENCE RI 02903

Title TRUSTEE
Name JOHNSON, DOLPH
Address HASBRO, INC.
1011 NEWPORT AVENUE
City-State-Zip: PAWTUCKET RI 02862

Title EX-OFFICIO
Name LAURANS, SCOTT B.
Address ESM INCORPORATED
1 WEST EXCHANGE STREET #2706
City-State-Zip: PROVIDENCE RI 02906

Title TRUSTEE
Name MEIKLEJOHN, MARK J.
Address BANK RI
ONE TURKS HEAD PLACE
City-State-Zip: PROVIDENCE RI 02903

Title TRUSTEE
Name PROCACCIANTI, JAMES A.
Address THE PROCACCIANTI GROUP
1140 RESERVOIR AVENUE
City-State-Zip: CRANSTON RI 02920