

**2014 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F05000003022

**FILED**  
**Apr 18, 2014**  
**Secretary of State**  
**CC4787513742**

**Entity Name:** THE MIRIAM HOSPITAL FOUNDATION INC.

**Current Principal Place of Business:**

164 SUMMIT AVENUE  
PROVIDENCE, RI 02906

**Current Mailing Address:**

167 POINT STREET  
SUITE 2B  
PROVIDENCE, RI 02903

**FEI Number:** 05-0377502

**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 LITWIN, ALAN H  
Address 951 NORTH MAIN STREET  
City-State-Zip: PROVIDENCE RI 02904

Title VC  
Name LANGLOIS, MARIE  
Address 254 WAYLAND AVENUE  
City-State-Zip: PROVIDENCE RI 02906

Title TREASURER  
Name HALL, ALMON  
Address NORTEK, INC.  
50 KENNEDY PLAZA  
City-State-Zip: PROVIDENCE RI 02903

Title SECRETARY  
Name KAPLAN, SUSAN H  
Address 741 ELMGROVE AVENUE  
City-State-Zip: PROVIDENCE RI 02906

Title EX-OFFICIO  
Name BABINEAU, TIMOTHY J M.D.  
Address THE MIRIAM HOSPITAL  
164 SUMMIT AVENUE  
City-State-Zip: PROVIDENCE RI 02903

Title TRUSTEE  
Name BAZAR, SUSAN  
Address 43 CINDYANN DRIVE  
City-State-Zip: EAST GREENWICH RI 02818

Title TRUSTEE  
Name BERKELHAMMER, MITZI  
Address 10 WOODLAND TERRACE  
City-State-Zip: PROVIDENCE RI 02906

Title TRUSTEE  
Name BRIER, JEFFREY G.  
Address BRIER & BRIER  
245 WATERMAN STREET SUITE 505  
City-State-Zip: PROVIDENCE RI 02906

**Continues on page 2**

*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:** ARTHUR J. SAMPSON

**PRESIDENT**

**04/18/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title TRUSTEE  
Name DORFMAN, JERROLD N.  
Address LGC&D  
10 WEYBOSSET STREET SUITE 700  
City-State-Zip: PROVIDENCE RI 02903

Title TRUSTEE  
Name FEIBELMAN, H. JACK  
Address 11 BALDWIN ORCHARD DRIVE  
City-State-Zip: CRANSTON RI 02920

Title TRUSTEE  
Name GILSTEIN, SUZANNE  
Address 25 OLD TANNERY ROAD  
City-State-Zip: PROVIDENCE RI 02906

Title TRUSTEE  
Name GREENWALD, SIDNEY  
Address 23 SURREY ROAD  
City-State-Zip: BARRINGTON RI 02806

Title LIFE TRUSTEE  
Name HURVITZ, ARTHUR  
Address 15 ABBOTTSFORD COURT  
City-State-Zip: PROVIDENCE RI 02906

Title TRUSTEE  
Name KAPLAN, MARY JO  
Address 283 WAYLAND AVENUE  
City-State-Zip: PROVIDENCE RI 02906

Title EX-OFFICIO  
Name LAURANS, SCOTT B.  
Address ESM INCORPORATED  
ONE WEST EXCHANGE STREET UNIT 2706  
City-State-Zip: PROVIDENCE RI 02903

Title TRUSTEE  
Name RAMPONE, DAVID  
Address HART ENGINEERING  
800 SCENIC VIEW DRIVE  
City-State-Zip: CUMBERLAND RI 02864

Title PRESIDENT  
Name SAMPSON, ARTHUR J.  
Address THE MIRIAM HOSPITAL  
164 SUMMIT AVENUE  
City-State-Zip: PROVIDENCE RI 02906

Title TRUSTEE  
Name SULS, SAMUEL K.  
Address 914 PELTIER DRIVE  
City-State-Zip: CARY NC 27519

Title TRUSTEE  
Name ELION, JONATHAN L. M.D.  
Address 2255 COMMODORE OLIVER HAZARD  
PERRY HWY.  
City-State-Zip: WAKEFIELD RI 02879

Title TRUSTEE  
Name FELDSTEIN, EDWARD ESQ.  
Address ROBERTS, CARROLL, FELDSTEIN &  
PIERCE, INC.  
10 WEYBOSSET STREET  
City-State-Zip: PROVIDENCE RI 02903

Title TRUSTEE  
Name GREENSPAN, NEIL R. M.D.  
Address GASTROENTEROLOGY ASSOCIATES,  
INC.  
44 WEST RIVER STREET  
City-State-Zip: PROVIDENCE RI 02904

Title TRUSTEE  
Name HASSENFELD, ALAN G.  
Address HASSENFELD FAMILY INITIATIVES,  
LLC  
101 DYER STREET SUITE 401  
City-State-Zip: PROVIDENCE RI 02903

Title TRUSTEE  
Name ISSA, STEVEN J.  
Address 16 LILAC STREET  
City-State-Zip: CUMBERLAND RI 02864

Title TRUSTEE  
Name KYDD, PHILIP  
Address 2 CAPITOL HILL  
ROOM 109  
City-State-Zip: PROVIDENCE RI 02903

Title CHAIR APPOINTED TRUSTEE  
Name LEDERER, BERTRAM H.  
Address TEKNOR APEX  
505 CENTRAL AVENUE  
City-State-Zip: PAWTUCKET RI 02861

Title TRUSTEE  
Name SALMANSON, JERROLD A.  
Address SALMANSON PROPERTIES  
155 SOUTH MAIN STREET  
City-State-Zip: PROVIDENCE RI 02903

Title TRUSTEE  
Name SCHECHTER, STEVEN M.D.  
Address RHODE ISLAND COLORECTAL  
CLINIC, LLC  
334 EAST AVENUE  
City-State-Zip: PAWTUCKET RI 02860

Title TRUSTEE

Name WEINGEROFF, LISA E.  
Address WEINGEROFF ENTERPRISE  
1 WEINGEROFF BOULEVARD  
City-State-Zip: CRANSTON RI 02910