



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River St., Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2007

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 18290		2. Name of Corporation THE LAUREL FOSTER HOME, INC.			
3. Street Address Principal Business Office 359 BROAD STREET			City PROVIDENCE	State RI	Zip 02907-
4. Business Phone No. 4018210136		5. State of Incorporation RHODE ISLAND			
6. Brief Description of the Character of Business Conducted in Rhode Island GENERAL OPERATION OF A NURSING HOME					
President Name David M Ryan			Vice President Name Sally J Ryan		
Street Address 101 Melrose Ave			Street Address 101 Melrose Ave		
City Jamestown	State RI	Zip 02835	City Jamestown	State RI	Zip 02835
Secretary Name Terry A Carragher			Treasurer Name David M Ryan		
Street Address 232 Broadway			Street Address 101 Melrose Ave		
City Providence	State RI	Zip 02903	City Jamestown	State RI	Zip 02835
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 NO PAR VALUE			1000		No Par

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.



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FILED
File Date
Check No. SEP 7 2007
By: By 11600
FOR SECRETARY OF STATE USE ONLY

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.

Signature
Terry A Carragher
Print or Type Name
Secretary
Title

Date
8-30-07