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State of Rhode Island and Providence Plantations
Office of the Secretary of State

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

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

***Filing Period: June 1 - June 30 • Filing Fee: $20.00 *** **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK**

**** 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.***

1. Corporate ID No.	2. Name of Corporation		
72735	Chiropractic Society of Rhode Island		
3. State of Incorporation	**4. Corporate address in Rhode Island - Street Address**	**City**	**Zip**
Rhode Island	Post Office Box 1107	Slatersville	02876

5. Foreign corporation. Enter principal office address	City	State	Zip

6. *Brief Description of the character of the affairs which are actually conducted in Rhode Island*
Professional Society of Chiropractic Physicians

7. NAMES AND ADDRESSES OF THE OFFICERS. [illegible] BOX FOR ATTACHMENT ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

President Name			Vice President Name		
Robert A. L'Europa			Andrew Crellin		
Street Address			**Street Address**		
1528 Cranston Street			328 Cowesett Avenue		
City	**State**	**Zip**	**City**	**State**	**Zip**
Cranston	Rhode Island	02910	West Warwick	Rhode Island	02893
Secretary Name			**Treasurer Name**		
Susan Donahue			Mark Breiding		
Street Address			**Street Address**		
72 East Street			5544 Post Road		
City	**State**	**Zip**	**City**	**State**	**Zip**
Pawtucket	Rhode Island	02860	East Greenwich	Rhode Island	02818

8. NAMES AND ADDRESSES OF THE DIRECTORS. [illegible] BOX FOR ATTACHMENT ☐ FILL IN SPACES BEFORE USING ATTACHMENTS. THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-27

Director Name			Director Name		
Robert A. L'Europa			Andrew Crellin		
Street Address			**Street Address**		
1528 Cranston Street			328 Cowesett Avenue		
City	**State**	**Zip**	**City**	**State**	**Zip**
Cranston	Rhode Island	02910	West Warwick	Rhode Island	02893
Director Name			**Director Name**		
Susan Donahue			Mark Breiding		
Street Address			**Street Address**		
72 East Street			5544 Post Road		
City	**State**	**Zip**	**City**	**State**	**Zip**
Pawtucket	Rhode Island	02860	East Greenwich	Rhode Island	02818

9. REGISTERED AGENT IN RHODE ISLAND [illegible] (Changes require filing of Form 631 [illegible] R.I.G.L. 7-6-[illegible])

Agent Name	Address	
Richard W. Anderson		
Address	**City**	**Zip**
14 South Drive	Middletown, Rhode Island	02842

This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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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 of Officer ______ *Date* ______

Robert A. L'Europa
Print or Type Name of Officer

President
Title of Officer

Form 631 Rev. 12/06