



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

Corporations Division
148 W. River St.
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK
* 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. 18150		2. Name of Corporation Alexander Philips M D Inc		
3. Street Address Principal Business Office 20 Cumberland Hill Road		City Woonsocket	State R I	Zip 02895
4. Business Phone No. 401 766 2970		5. State of Incorporation Rhode Island		
6. Brief Description of the Character of Business Conducted in Rhode Island Medical Office				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Alexander Philips		Vice President Name Philip A Philips		
Street Address 20 Cumberland Hill Road		Street Address 20 Cumberland Hill Road		
City Woonsocket	State R I	Zip 02895	City Woonsocket	State R I
Secretary Name Alexander Philips		Treasurer Name Alexander Philips		
Street Address 20 Cumberland Hill Road		Street Address 20 Cumberland Hill Road		
City Woonsocket	State R I	Zip 02895	City Woonsocket	State R I
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>				
AUTHORIZED SHARES			ISSUED SHARES — THIS SECTION MUST BE COMPLETED	
Number of Shares	Class Series	Par Value	Number of Shares	Class Series
600	No Par Value		200	Common
			without par value	

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.

FILED
File Date: **JAN 22 2008**
Check No. _____
By: 9/03 mnc
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: Alexander Philips Date: 1/17/08
Print or Type Name: Alexander Philips
Title: President