



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

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. 91206		2. Name of Corporation University Foot Center, Inc.			
3. Street Address Principal Business Office 235 Plain Street			City Providence	State RI	Zip 02905
4. Business Phone No. 401 861-8860		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island To engage in the practice of podiatric surgery.					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name James T. Pascalides, DPM			Vice President Name Peter J. Sardella, DPM		
Street Address 235 Plain Street			Street Address 235 Plain Street		
City Providence	State RI	Zip 02905	City Providence	State RI	Zip 02905
Secretary Name Peter J. Sardella, DPM			Treasurer Name James T. Pascalides, DPM		
Street Address 235 Plain Street			Street Address 235 Plain Street		
City Providence	State RI	Zip 02905	City Providence	State RI	Zip 02905
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name None			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
9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ☐ AUTHORIZED SHARES			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐ ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
8,000	\$1.00 Par Value		204	Common	\$1.00

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.

File Date	FILED
Check No.	JAN 30 2008
By:	DS-20094
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

Date

James T. Pascalides

Print or Type Name

President

Title