

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

Fee: \$50.00

Corporations Division 148 W. River Street Providence, Rhode Island 02904-2615 Telephone: (401) 222-3040

# Business Corporation Annual Report

Filing Period: January 1 - March 1

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.

**ANNUAL REPORT YEAR: 2008** 

**1. Corporate ID No.** 000115911

- 2. Name of Corporation QUALITY BEHAVIORAL HEALTH, INC.
- 3. Street Address Principal Business Office:

No. and Street: 1090 NEW LONDON AVENUE

City or Town: <u>CRANSTON</u> State: <u>RI</u> Zip: <u>02920</u> Country: <u>USA</u>

4. Business Phone No.

401-463-5778

5. State of Incorporation

State: RI

6. Brief Description of the Character of Business Conducted in Rhode Island

### TO PROVIDE MENTAL HEALTH SERVICES

#### 7. Names and Addresses of the Officers and Directors:

| Title     | Individual Name             | Address   |  |
|-----------|-----------------------------|---|--|
|           | First, Middle, Last, Suffix | Address, City or Town, State, Zip Code, Country   |  |
| PRESIDENT | ROBERT P. ARRUDA            | 1090 NEW LONDON AVE<br>CRANSTON, RI 02920 US      |  |
| PRESIDENT | ROBERT P ARRUDA             | 1090 NEW LONDON AVENUE<br>CRANSTON, RI 02920- USA |  |

#### 8. Shares Authorized and Issued

| Class of Stock | Series of Stock | Par Value Per<br>Share | Total Authorized Shares  Number of Shares | Total Issued<br>and<br>Outstanding<br>Num of<br>Shares |
|----------------|-----------------|------------------------|---|--|
| CWP            |                 | \$1.00                 | 8,000.00                                  | 6000   |

9. 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.

**Signed this 28 Day of March, 2008 at 11:46:51 AM.** This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.

# By ROBERT P. ARRUDA

Signature of Authorized Representative of the Corporation

## **PRESIDENT**

Title

Form No. 630 Revised 09/07

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