

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

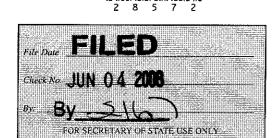
NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

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 falling 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						
28572		Miriam Hospital Women's Assn.					
3. State of Incorporation	1 -	4. Corporate address in Rhode Island - Street Address			Zip		
Rhode Island	164 Sumn			Providence	02906		
5. Foreign corporation. En	ter principal office addr	ess	City	State	Zip		
	aracter of the affairs whi	ich are actually conducted in I	Rhode Island				
non profit fundraising							
T NAMES AND AND	escuciae amaza		 		8 <u>0000098488888</u>		
7. NAMES AND ADDRESSES OF THE OFFICERS; CX" BOX FOR AT President Name			Vice President Name				
Melissa Baker (co-president)			Amy Goldstein				
Street Address			Street Address				
10 Intervale Road			195 Sessions Street				
City	State	Zip	City	State	Zip		
Providence	RI	02906	Providence	RI	02906		
Secretary Name		10200	Treasurer Name		02300		
Barbara Sheer			Sue Suis				
Street Address			Street Address				
145 Grotto Avenue			57 Capwell Avenue				
City	State	Zip	City	State	Zip		
Providence	RI	02906	Pawtucktet	RI	02860		
8. NAMES AND ADDR	ESSES OF THE DII	RECTORS: ("X" BOX FOR	ATTACHMENT) TELL IN SPA	CES BEFORE USING ATTA	GHMENTS		
THE NUMBER OF DIR	ECTORS OF A DO	MESTIC (RHODE ISLA	ND) CORPORATION SHALL	NOT BE LESS THAN THE	EE (3). R.L.G.L. 7-6-23		
Director Name			Director Name				
Renee Vogel (co- president)			Judi Blau (vice president)				
Street Address			Street Address				
65 East Orchard Ave.			93 University Avenue				
City	State	Zip	City	State	Zip		
Providence	RI	02906	Providence	RI	02906		
Director Name			Director Name				
Joyce Leven (co-president)			Maybeth Lichaa (vice president)				
Street Address			Street Address				
41 Galen Court			104 Governor Bradford Drive				
City	State	Zip	City	State	Zip		
Seekonk	RI	02771	Barrington	RI	02806		
	I IN RHODE ISLA	ND DO NOT ALTER -	Changes require filing of Fo	icm 641 - R.I.G.L. 7-6-13	7-6-78		
Agent Name			Address				
Mary T. Ferreira							
Address			City	Zip			
164 Summit Avenue			Providence	02906	6		
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This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



Under penalty of perjury, I dec report, including any accompany statements contained herein are	ying s ? hedules :	and statements	
Signature of Officer	loge	<u> </u>	30/00 Date
Renee Vogel Print or Type Name of Officer			
co-president			- (** 1.114K
Title of Officer			