



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 2006

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. 000029893		2. Name of Corporation The Rhode Island Council of Resource Providers for Children Youth and Families, Inc.			
3. State of Incorporation 501(C)(3)		4. Corporate address in Rhode Island - Street Address 55 S. Brown ST		City E. Prov.	Zip 02914
5. Foreign corporation. Enter principal office address				City	State
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name William Beardon			Vice President Name Patricia St. Germain		
Street Address 31 King Charles Drive			Street Address 623 Attwells Ave., Suite 201-D		
City Portsmouth	State RI	Zip 02871	City Providence	State R.I.	Zip 02909
Secretary Name Susan Fukuda			Treasurer Name Eugene Cavaliere		
Street Address 70 Main St.			Street Address 63 Harmony Hill Rd.		
City Taunton	State MA	Zip 02780	City Chepachet	State RI	Zip 02814
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 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. 7-6-23					
Director Name James R. Harris, Jr. Ph.D			Director Name John Farley		
Street Address 55 S. Brown ST.			Street Address 55 Hope ST.		
City E. Prov.	State R.I.	Zip 02914	City Providence	State R.I.	Zip 02906
Director Name Amanda Tummavelli			Director Name Daniel O'Grady		
Street Address 55 S. Brown ST.			Street Address 1055 N. Main St. PO Box 72832		
City E. Prov	State R.I.	Zip 02914	City Prov	State R.I.	Zip 02907
9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78					
Agent Name James R. Harris, Jr. Ph.D			Address		
Address 55 S. Brown ST.			City E. Providence	Zip 02914	

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

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File Date JUL 08 2008

Check No. 82-8 BY OLW 875 12:28

By: _____

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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.

William Beardon 7/10/08
Signature of Officer Date

William Beardon
Print or Type Name of Officer

Board Chair
Title of Officer