



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 2009
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. 87726		2. Name of Corporation ROSATI & Associates, Inc					
3. Street Address Principal Business Office P.O. Box 6423		City Providence	State RI	Zip 02940			
4. Business Phone No. 453-1400		5. State of Incorporation Rhode Island					
6. Brief Description of the Character of Business Conducted in Rhode Island consulting firm							
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS							
President Name Rick J. Rosati		Vice President Name Elizabeth A. Cameron					
Street Address P.O. Box 6423		Street Address P.O. Box 6423					
City Providence	State RI	Zip 02940	City Providence	State RI	Zip 02940		
Secretary Name Elizabeth A. Cameron		Treasurer Name Rick J. Rosati					
Street Address P.O. Box 6423		Street Address P.O. Box 6423					
City Providence	State RI	Zip 02940	City Providence	State RI	Zip 02940		
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS							
Director Name		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 4,000 no par value					10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.					ISSUED SHARES — THIS SECTION <u>MUST</u> BE COMPLETED		
					Number of Shares	Class/Series	Par Value
					100		0

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 1-16-09
Check No. 7349
By: MMC
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 Elizabeth A. Cameron Date 1/16/09
Print or Type Name Elizabeth A. Cameron
Title Vice President