RI SOS Filing Number: 200940913240 Date: 01/27/2009 10:42 AM

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

Foreign 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: 2009

1. Corporate ID No. 000122894

2. Name of Corporation TRUESDALE CARDIOLOGY ASSOCIATES, INC.

3. Street Address Principal Business Office:

No. and Street: 1030 PRESIDENT AVENUE
City or Town: FALL RIVER State: MA Zip: 02720 Country: USA

4. Business Phone No.

508-676-3411 EXT 6458

5. State of Incorporation

State: MA

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

TO ENGAGE IN THE PRACTICE OF CARDIOLOGY AND THE PRACTICE AND PROVISION OF PROFESSIONAL SERVICES OF GENERAL MEDICINE.

7. Names and Addresses of the Officers and Directors:

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
TREASURER	JAY S SCHACHNE MD	6 PIERCE COURT BARRINGTON, RI 02806 USA
SECRETARY	PETER COHN MD	4 ROBBINS DRIVE BARRINGTON, RI 02806 USA
PRESIDENT	JAY S SCHACHNE MD	6 PIERCE COURT BARRINGTON, RI 02806- USA
VICE PRESIDENT	PETER G MANDELSON MD	6 MAXFIELD COURT BARRINGTON, RI 02806 USA
DIRECTOR	JAY S SCHACHNE MD	6 PIERCE COURT BARRINGTON, RI 02806 USA
DIRECTOR	PETER COHN MD	4 ROBBINS DRIVE BARRINGTON, RI 02806 USA
DIRECTOR	MARYANNE NORRIS MD	15 WILDFLOWER ROAD BARRINGTON, RI 02806 USA
DIRECTOR	PETER G MANDELSON MD	6 MAXFIELD COURT BARRINGTON, RI 02806 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares *Number of Shares*	Total Issued and Outstanding *Num of Shares*
CNP		$0.00	15,000.00	300

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 27 Day of January, 2009 at 10:43:24 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 JAY S. SCHACHNE
Signature of Authorized Representative of the Corporation

PRESIDENT
Title

Form No. 630
Revised 09/07