



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(e&f)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. <b>71680</b>		2. Name of Corporation <b>Addiction Recovery Institute, Inc.</b>	
3. Street Address: Principal Business Office <b>31 North Union Street</b>		City <b>Pawtucket</b>	State <b>RI</b>
4. Business Phone No. <b>401-725-2520</b>		5. State of Incorporation <b>Rhode Island</b>	
6. Brief Description of the Character of Business Conducted in Rhode Island <b>Methadone maintenance clinic and counseling service</b>			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name <b>Eileen Hoff</b>		Vice President Name	
Street Address <b>67 Albert Avenue</b>		Street Address	
City <b>Cranston</b>	State <b>RI</b>	City	State
Zip <b>02905</b>		Zip	
Secretary Name <b>Gordon P. Cleary</b>		Treasurer Name <b>Jeanne H. O'Reilly</b>	
Street Address <b>129 River Run Road</b>		Street Address <b>57 Stonegate Drive</b>	
City <b>Middletown</b>	State <b>RI</b>	City <b>Portsmouth</b>	State <b>RI</b>
Zip <b>02842</b>		Zip <b>02871</b>	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name <b>Eileen Hoff</b>		Director Name <b>Jeanne H. O'Reilly</b>	
Street Address <b>67 Albert Avenue</b>		Street Address <b>57 Stonegate Drive</b>	
City <b>Cranston</b>	State <b>RI</b>	City <b>Portsmouth</b>	State <b>RI</b>
Zip <b>02905</b>		Zip <b>02871</b>	
Director Name <b>Gordon P. Cleary</b>		Director Name	
Street Address <b>129 River Run Road</b>		Street Address	
City <b>Middletown</b>	State <b>RI</b>	City	State
Zip <b>02842</b>		Zip	
9. SHARES AUTHORIZED <b>1,000</b>		10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>	
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 MUST BE COMPLETED	
		Number of Shares <b>1,000</b>	Class/Series <b>Common</b>
		Par Value <b>No Par</b>	

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.

<b>FILED</b>	
File Date <b>FEB 23 2009</b>	
Check No. <b>By 1985</b>	
By:	
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 Eileen Hoff Date 2/19/09  
**Eileen Hoff**  
Print or Type Name  
**President**  
Title