



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
401.222.3030

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. 149331		2. Name of Corporation SANDRA E. DUCLOS, Ph.D., INC.	
3. Street Address Principal Business Office 6 BLACKSTONE VALLEY PLACE, Ste. 109		City LINCOLN	State RI
4. Business Phone No. 401-334-9104		5. State of Incorporation Rhode Island	
6. Brief Description of the Character of Business Conducted in Rhode Island To conduct the PRACTICE of Clinical Psychology			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name SANDRA E. DUCLOS		Vice President Name FERMAN J. DUCLOS, JR.	
Street Address 187 GLENWOOD AVE.		Street Address 187 GLENWOOD AVE.	
City PAWTUCKET	State RI	City PAWTUCKET	State RI
Zip 02860		Zip 02860	
Secretary Name FERMAN J. DUCLOS, JR.		Treasurer Name SANDRA E. DUCLOS	
Street Address 187 GLENWOOD AVE		Street Address 187 GLENWOOD AVE	
City PAWTUCKET	State RI	City PAWTUCKET	State RI
Zip 02860		Zip 02860	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name SANDRA E. DUCLOS		Director Name FERMAN J. DUCLOS, JR.	
Street Address 187 GLENWOOD AVE.		Street Address 187 GLENWOOD AVE.	
City PAWTUCKET	State RI	City PAWTUCKET	State RI
Zip 02860		Zip 02860	
Director Name NONE		Director Name NONE	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
9. SHARES AUTHORIZED		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. 2,000 NO PAR VALUE		ISSUED SHARES — THIS SECTION MUST BE COMPLETED	
		Number of Shares 100	Class/Series STK
			Par Value NO PAR VALUE

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.

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
Sandra E. Duclos 2/25/2009
Date
SANDRA E. DUCLOS
Print or Type Name
PRESIDENT & TREASURER
Title

File Date
2-27-09
Check No.
1020
By
MNC

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