



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. 74258		2. Name of Corporation Independent Research Nurses, Inc.			
3. Street Address Principal Business Office 400 Bald Hill Road			City Warwick	State RI	Zip 02886
4. Business Phone No. 401-739-9350		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island Coordinating clinical drug trials					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Johnna Pezzullo			Vice President Name Lynne Haughey		
Street Address 32 Hummingbird Lane			Street Address 30 Derbyshire Drive		
City Cranston	State RI	Zip 02921	City Cranston	State RI	Zip 02921
Secretary Name Lynne Haughey			Treasurer Name Johnna Pezzullo		
Street Address 30 Derbyshire Drive			Street Address 32 Hummingbird Lane		
City Narragansett	State RI	Zip 02921	City Cranston	State RI	Zip 02921
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Johnna Pezzullo			Director Name Lynne Haughey		
Street Address 32 Hummingbird Lane			Street Address 30 Derbyshire Drive		
City Cranston	State RI	Zip 02921	City Cranston	State RI	Zip 02921
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			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 MUST BE COMPLETED		
			Number of Shares 271	Class/Series Common	Par Value No Par

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.

FILED	
File Date	MAR 06 2009
Check No.	
By:	By 20514
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: Johnna Pezzullo
Date: 2/23/09
Print or Type Name: President
Title: