

State of Rhode Island and Providence Plantations Office of the Secretary of State

Fee: \$20.00

Corporations Division 148 W. River Street Providence, Rhode Island 02904-2615 Telephone: (401) 222-3040

Non-Profit Corporation Annual Report

Filing Period: June 1 - June 30

In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2009

1. Corporate ID No. 000164417

- 2. Name of Corporation American Academy of Addiction Psychiatry
- 3. State of Incorporation

State:

4. Corporate Address in Rhode Island

No. and Street: 345 BLACKSTONE BOULEVARD, 1ST

FLOOR - WELD

City or Town: PROVIDENCE State: RI Zip: 02906 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

CHARITABLE EDUCATIONAL AND SCIENTIFIC ACTIVITIES

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title
Incorporator is no longer applicable; please delete

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	ELINORE MCCANCE-KATZ MD, PHD	1001 PETRERO AVE, SUITE 7M-WD93 SAN FRANCISCO, CA 94410 US
TREASURER	LAURENCE M. WESTREICH MD	275 CENTRAL PARK WEST APT 1A NEW YORK, NY 10024 US
SECRETARY	SHELLY F GREENFIELD MD, MPH	115 MILL STREET BELMONT, MA 02478 US
VICE PRESIDENT	JOSEPH G. LIBERTO MD	10 NORTH GREENE ST - 116A BALTIMORE, MD 21201 US
DIRECTOR	JOHN MARIANI MD	1051 RIVERSIDE DRIVE NEW YORK, NY 10032 US
DIRECTOR	FRANCES R. LEVIN MD	1051 RIVERSIDE DRIVE UNIT 66 NEW YORK, NY 10032 US
DIRECTOR	RICHARD K. RIES MD	359911 HARBORVIEW MEDICAL CENTER, 325 NINTH AVE SEATTLE, WA 98104 US
DIRECTOR	ISMENE PETRAKIS MD	950 CAMPBELL AVE WEST HAVEN, CT 06516 US
DIRECTOR	JOHN A RENNER MD	251 CAUSEWAY ST BOSTON, MA 02114 US
DIRECTOR	RICHARD N ROSENTHAL MD	1090 AMSTERDAM AVE, 16TH FL NEW YORK, NY 10025 US
DIRECTOR	LAURA F MCNICHOLAS MD, PHD	BEH.HEALTH 7 EAST (116), UNIVERSITY & WOODLAND AVE PHILADELPHIA, PA 19104 US
DIRECTOR	PENELOPE P ZIEGLER MD	5477 MOORETOWN RD WILLIAMSBURG, VA 23188 US
DIRECTOR	SHELDON I MILLER MD	9441 CENTRAL PARK AVE EVANSTON, IL 60203 US
DIRECTOR	STEPHEN ROSS MD	34 KANE AVE LARCHMONT, NY 10538 US
DIRECTOR	PETER R MARTIN MD	1601 23RD AVE SOUTH SUITE 3068 NASHVILLE, TN 37232 US

8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver, or Trustee.

Signed this 20 Day of May, 2009 at 10:29:50 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 § 7-6.

By ELINORE MCCANCE-KATZ, MD, PHD Signature of Officer of the Corporation

<u>X</u> President or Vice President or Secretary or Assistant Secretary or
Treasurer or Receiver or Trustee (check one)
This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in Section 7.
Form No. 631 Revised 09/07
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