



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

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

Filing Period: June 1 - June 30 • **Filing Fee:** \$20.00* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

* 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.

1. Corporate ID No. 29044		2. Name of Corporation VNS HomeCare, Inc.			
3. State of Incorporation Rhode Island		4. Corporate address in Rhode Island - Street Address 14 Woodruff Avenue, Suite 7		City Narragansett	Zip 02882
5. Foreign corporation. Enter principal office address			City	State	Zip
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island Home Health Care					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Mary Lou Rhodes			Vice President Name None		
Street Address 14 Woodruff Avenue, Suite 7			Street Address		
City Narragansett	State RI	Zip 02882	City	State	Zip
Secretary Name Linda Butcher			Treasurer Name None		
Street Address 128 South Road			Street Address		
City Wakefield	State RI	Zip 02879	City	State	Zip
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23					
Director Name Joseph Matthews			Director Name Laura Harris		
Street Address 3103 Old Post Road			Street Address 2625E Commodore Perry Highway		
City Perryville	State RI	Zip 02879	City Wakefield	State RI	Zip 02879
Director Name Jason Marshall			Director Name Meg Sisco		
Street Address 14 Woodruff Avenue			Street Address 6 North Stuart Street		
City Narragansett	State RI	Zip 02882	City Westerly	State RI	Zip 02891
9. REGISTERED AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-78					

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

29044

FILED	
File Date	JUN 15 2009
Check No.	
By	1662
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.

Mary Lou Rhodes 5/14/2009
Signature of Officer Date

Mary Lou Rhodes
Print or Type Name of Officer

President
Title of Officer