

FOR SECRETARY OF STATE USE ONLY

2. Name of Corporation

penalty fee of \$25.00. 1. Gorporate ID No. 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

152215 The Rhode Island Society of Orthotists and Prosthetists Z(0)3. State of Incorporation 4. Corporate address in Rhode Island - Street Address Cranston 02910 1559 Elmwood Avenue Rhode Island State Ζψ City 5. Foreign corporation. Enter principal office address 6. Brief Description of the character of the affairs which are actually conducted in Rhode Island receive administer expend funds to promote and represent common business interests of and improve business conditions among members 7. NAMES AND ADDRESSES OF THE OFFICERS; ("X" BOX FOR ATTACHMENT) 🔲 FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name President Name William Teoli None Street Address Street Address 1559 Elmwood Avenue State Ζψ City State $Z\psi$ Cranston RI 02910 Treasurer Name Secretary Name Robert James Michael Nunnery Street Address Street Address 7408 Post Road 162 Main Street City State Zψ CityState Zij) 02852 R Wakefield l Ri 02879 North Kingstown 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) TILL IN SPACES BEFORE USING ATTACHMENTS THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION <u>SHALL NOT BE LESS THAN THREE (</u>3). R.I.G.L. 7-6-23 Director Name Director Name Michael Nunnery William Teoli Street Address Street Address 7408 Post Road 1559 Elmwood Avenue City State Zψ City State Zip02852 RI 02910 RI North Kingstown Cranston Director Name Director Name Robert James None Street Address Street Address 162 Main Street City State Z_{Ψ} City State Zij) RI 02879 Wakefield 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 152215 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 File Date Signature of Officer JUN 3 0 2009 Check No. William Teoli LE E Hd OS NOT 6000 or Type Name of Officer

AIO SNOILV BOOD Title of Officer

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Form 631 Rev. 09/17

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President