

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.

penatry jee of \$2,5.00.						
1. Corporate ID No.	2. Name of Cor	2. Name of Corporation				
486172	Extraordina	ary Child				
3. State of Incorporation	4. Corporate ac	ldress in Rhode Island - Street	Address	City	Zip	
Rhode Island	123B Victo	orv Street		Cumberland	02864	
5. Foreign corporation. Euter principal office address			City	State	Zip	
6. Brief Description of the cha	racter of the affairs whi	ich are actually conducted in I	Rbode Island		<b></b>	
To provide an indoor/o	utdoor recreations	al facility designed for c	hildren with special needs			
7. NAMES AND ADDRI	esses of the of	FICERS: ("X" BOX FOR A	ITTACHMENT) 🗸 FILL IN SPAC	CES BEFORE USING ATTA	CHMENTS	
President Name			Vice President Name			
Stephanie Marshali			Melissa French			
Street Address			Street Address			
593 Brayton Avenue	Apt 2B		31 Saltaire Avenue			
City	State	Ζip	City	State	Zip	
Somerset	MA	02726	Narragansett	RI	02882	
Secretary Name			Treasurer Name Gina Kuecks-Morga	เท		
Street Address		:	Street Address 32 Belair Avenue			
Сиу	State	Zip	City	State	Ziρ	
•			Providence	· RI	02906	
8. NAMES AND ADDRE	SSES OF THE DIE	RECTORS: ("X" BOX FOR	ATTACHMENT) I FILL IN SPA			
			ND) CORPORATION SHALL			
Director Name	or in 20		Director Name	TO THE MANAGEMENT ASSESSMENT OF THE PARTY OF	<u>ga</u> (3), 102.0.2. /-0-23	
Stephanie Marshall			Melissa French			
Street Address	<del>, , ,,</del>	······································	Street Address			
593 Brayton Avenue	Ant 2R		31 Saltaire Avenue			
City	State	Zip	City	State	Zip	
Somerset	MA	02726	Narragansett	RI	02882	
Director Name	1307	102120	Director Name	1131	102002	
Melissa Rose Radem	nacher		Kerry Bozek			
Straet Address			Street Address			
191 Hemlock Road			2 Terrace Avenue			
City	State	Zip	City	State	Zip	
Wakefield	RI	02879	Cumberland	RI	02864	
vvanencio 9. REGISTERED AGENT			· Cumbenand	į Ki	( 02004	
,,	IJLAI	··			•	
This information is curren	atly of record in the	e Office of the Secretary of	of State. Changes require filing of	f Form 641 - R.I.G.L. 7-6-13	77-6-78	
This report	must be signed by	either the President. Vic	e President, Secretary, Assistan	t Secretary, Treasurer Rec-	eiver or Trustee	
topott					D. T. J. IIUGUUC	

	486172		
		<ul> <li>Under penalty of perjury, I declare and affirm that I hav report, including any accompanying schedules and statem</li> </ul>	
File Date	7-1-09	statements contained herein age true and correct.	6/28/0
Check No.	1001	Stephanie Marshall	Date
<i>B</i> y:	mnc	Print or Type Name of Officer  Pro-GIAINE	
FOR SE	SCRETARY OF STATE USE ONLY	Title of Officer Form	631 Rev. 09/17

2009 Annual Report Attachment Extraordinary Child ID No. 486172

## Section 7 (continued):

Corresponding Secretary: Kerry Bozek 2 Terrace Avenue Cumberland, RI 02864

Recording Secretary: Melissa Rose Rademacher 191 Hemlock Road Wakefield, RI 02879

## Section 8 (continued):

Director Name: Jennifer Gingras 123b Victory Street Cumberland, RI 02864

Director Name: Jacqueline Mallette 25 Longbow Drive West Warwick, RI 02893

Director Name: Gina Kuecks-Morgan 32 Belair Avenue Providence, RI 02906

FILED

JUL 01 2009

By MYCO