RI SOS Filing Number: 200948839380 Date: 08/06/2009 4:00 PM

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.	2. Name of Corporation		
80184	RHODE ISLAND MENTAL HEALTH COUNSELOR'S ASSOCIATION		
3. State of Incorporation	4. Corporate address in Rhode Island - Street Address	City	Zip
R.I.	31 SMITH AVE - 3 REAR	GREENVILLE	02828
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

ADVANCE THE PROFESSION OF MENTAL HEALTH COUNSELING

7. NAMES AND ADDRESSES OF THE OFFICERS: (*"X" BOX FOR ATTACHMENT*) ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name			Vice President Name		
SUSAN WRIGHT			COLLEEN JUDGE		
Street Address			Street Address		
36 CONCORD AVE.			46 BARNES ST.		
City	State	Zip	City	State	Zip
CRANSTON	RI	02910	GREENVILLE	RI	02828
Secretary Name			Treasurer Name		
N/A			N/A		
Street Address			Street Address		
City	State	Zip	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			Director Name		
LEE DALPHONSE			NAHID ABED FAGHRI		
Street Address			Street Address		
7 BOULDER DR.			55 SPRING VALLEY DR.		
City	State	Zip	City	State	Zip
COVENTRY	RI	02816	E. GREENWICH	RI	02818
Director Name			Director Name		
ELIZABETH ALOISIO			CYNTHIA BEARSE		
Street Address			Street Address		
1090 NEW LONDON AVE			10 LAWNWOOD RD.		
City	State	Zip	City	State	Zip
CRANSTON	RI	02920	COVENTRY	RI	02816

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-

RECEIVED AUG - 6 10:08 SECRETARY OF STATE CORP DIV

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

FILED
AUG 06 2009
By DS 090109

File Date	**FILED**
	AUG 0
Check No.	
By:	**By** DS 090109

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.

Susan Wright — 7/28/2009
Signature of Officer — *Date*

SUSAN WRIGHT
Print or Type Name of Officer

PRESIDENT
Title of Officer

Form 631 Rev. 09/17

36581-2-395173