



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 2008

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. 94367		2. Name of Corporation Rhode Island Neurological Association			
3. State of Incorporation Rhode Island		4. Corporate address in Rhode Island - Street Address One Randall Square, Suite 409		City Providence	Zip 02904
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					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Gary L'Europa, M.D.			Vice President Name Vlad Zayas		
Street Address 227 Centerville Road			Street Address 450 Veteran's Memorial Parkway, Suite 11		
City Warwick	State RI	Zip 02886	City East Providence	State RI	Zip 02914
Secretary Name Arshad Iqbal, M.D.			Treasurer Name Carlos Nieto, M.D.		
Street Address 4519 Post Road			Street Address 300 Toll Gate Road, Suite 301A		
City Warwick	State RI	Zip 02818	City Warwick	State RI	Zip 02886
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 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 Gary L'Europa, M.D.			Director Name Vlad Zayas, M.D.		
Street Address Same as above			Street Address Same as above		
City	State	Zip	City	State	Zip
Director Name Arshad Iqbal, M.D.			Director Name Carlos Nieto, M.D.		
Street Address Same as above			Street Address Same as above		
City	State	Zip	City	State	Zip
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

94367

FILED	
File Date	AUG 07 2009
Check No.	DS 11:10
By	By
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.

Signature of Officer
Arshad Iqbal
Date
8/5/09
Print or Type Name of Officer
Arshad Iqbal
Title of Officer
Treasurer