



State of Rhode Island and Providence Plantations
Office of the Secretary of State

Fee: \$20.00

Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615
Telephone: (401) 222-3040

**Non-Profit Corporation
Annual Report**

Filing Period: June 1 - June 30

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.

ANNUAL REPORT YEAR: 2009

1. Corporate ID No. 000026279

2. Name of Corporation Thundermist Health Center

3. State of Incorporation

State:

4. Corporate Address in Rhode Island

No. and Street: 191 SOCIAL STREET

City or Town: WOONSOCKET

State: RI

Zip: 02895 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

PRIVATE, NONPROFIT, COMPREHENSIVE COMMUNITY HEALTH CENTER

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	MARY EDDY	110 SHADOW FARM WAY, #37 WAKEFIELD, RI 02879 USA
TREASURER	M. DOUGLAS FAY	55 DORRANCE STREET, 4TH FLOOR PROVIDENCE, RI 02903 USA
SECRETARY	JANICE MAGUIRE	40 MELLBRIDGE DRIVE WAKEFIELD, RI 02879 USA
VICE PRESIDENT	LOIS MONTEIRO	370 BARNES ROAD HARRISVILLE, RI 02830 USA
DIRECTOR	MONIQUE BILODEAU	91 NORTH STREET EAST DOUGLAS, MA 01516 USA
DIRECTOR	LINDA CANNISTRA	87 RIDGE ROAD SMITHFIELD, RI 02917 USA
DIRECTOR	THOMAS EVANS	65 ALBRO LANE WAKEFIELD, RI 02879 USA
DIRECTOR	ALEXANDRA REGO	75 HILL STREET MILLVILLE, MA 01529 USA
DIRECTOR	TIMOTHY HENRY	27 CEDAR POND DRIVE, APT. #5 WARWICK, RI 02886 USA
DIRECTOR	RONDA ROBIN	50 ROCKLAND AVENUE WOONSOCKET, RI 02895 USA
DIRECTOR	JACQUES DELAPORTE	P. O. BOX 5359 WAKEFIELD, RI 02879 USA
DIRECTOR	MARY ELLEN FAIN	211 WATERMAN STREET, APT. 1 PROVIDENCE, RI 02906 USA
DIRECTOR	BRENDA SEAGRAVE-WHITTLE	299 PROMENADE STREET PROVIDENCE, RI 02908 USA
DIRECTOR	NEWTON WHIPPLE	878 BLACK PLAIN ROAD NORTH SMITHFIELD, RI 02896 USA
DIRECTOR	LEO COSTANTINO	79 CROMPTON AVENUE WEST WARWICK, RI 02893 USA
DIRECTOR	LOIS CHAVEZ	1543 SOUTH ROAD KINGSTON, RI 02881 USA
DIRECTOR	LAWRENCE TRIM	2 FAIRWAY DRIVE BARRINGTON, RI 02806 USA
DIRECTOR	DONALD LARSEN	220 VILLAGE ROAD, APT. #19 WOONSOCKET, RI 02895 USA
DIRECTOR	JEFF BUCKLEY	1632 KINGSTOWN ROAD PEACE DALE, RI 02879 USA
DIRECTOR	LISA BISACCIA	ONE CVS DRIVE WOONSOCKET, RI 02895 USA
DIRECTOR	LAURENT LAMOTHE	10 HARRIS AVENUE WEST WARWICK, RI 02893 USA

8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

SAMUEL LINIADI 191 SOCIAL STREET WOONSOCKET , RI 02895

9. This report must be signed by either the President, Vice President, Secretary, Assistant

Secretary, Treasurer, Receiver, or Trustee.

Signed this 13 Day of August, 2009 at 3:49:58 PM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By MARY EDDY

Signature of Officer of the Corporation

President or Vice President or Secretary or Assistant Secretary or

Treasurer or Receiver or Trustee (check one)

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in Section 7.

Form No. 631
Revised 09/07

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