

A. Ralph Mollis, Secretary of State Corporations Division

148 W. River Street

Providence, RI 02904-2615 401.222,3040

## PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2010 Filing Period: January 1 - March 1 • Filing Fee: \$50.00\* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(ecid)) is subject to a penalty fee of \$25.00.

1 Corporate ID No. <b>66836</b>	2. Name of Cor CONSIST	2. Name of Corporation CONSISTENT CARE CORPORATION				
3. Street Address Principal Business Office 8 CLINTON AVE			City JAMESTOWN	State RI	2ip 02835	
4 Business Phone No. 5. State of Incorporation 401-423-1060 RI						
6. Brief Description of the Chard  TEALT CAY  7. NAMES AND ADDRES  President Name  GAIL SHEAHAN	LR .	icted in Rhode island  ICERS: ("X" BOX FOR ATTA	ICHMENT)		ATTACHMENTS	
Street Address 37 CLARKES VILLAGE			Street Address 36 HARVESTWOOD LANE			
City JAMESTOWN	State <b>Ri</b>	<i>Ζψ</i> 02835	City HIGGANUM	State CT	Zip 06441	
Secretary Name ELAZABETH SHEAHA	<i>\</i>		Treasurer Name DALE MILLER		1.00	
Street Address 25 NORTH HIGH VIEW DRIVE			Street Address 1130 TEN ROD ROAD STE F103			
NARRAGANSET	State RI	<i>Ζψ</i> <b>02882</b>	City NO KINGSTON	State RI	Ζψ 02852	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR AT Director Name GAIL SHEAHAN Street Address 37 CLARKES VILLAGE			TACHMENT)   FILL IN SPACES BEFORE USING ATTACHMENTS  Director Name CHARLES SHEAHAN  Street Address 36 HARVESTWOOD LANE			
City	State	Zip	City	State	Zψ	
JAMESTOWN Director Name	RI	02835	HIGGANUM  Director Name	СТ	06441	
ELAZABETH SHEAHA	AN		DALE MILLER			
25 NORTH HIGH VIEW DRIVE			Street Address 1130 TEN ROD ROAD STE F103			
city NARRAGANSET D. shares authorized	State RI	02882		State   RI ("X" BOX FOR ATTACE	<sup>Zij</sup> 02852 IMENT) □	
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			ISSUED SHARES — THIS SEC  Number of Shares	Class/Series	Par Value	
			1000	COMMON	NO VALUE	
This report must be executions report must be executed	ted on behalf of the	ne corporation by an authorize e corporation by the receiver	or trustee. Under <b>p€n⊋</b> lty of pe.	rjury, I declare and affirm t	hat I have examined this repo	
File Date  Check No.  By:	ED		Signature  GAIL SHEA  Print of Type Vame	AHAN	tements, and that all stateme	
FOR SECRETARY OF	STATE LIST ONLY	485	Thile	JEI	Form 630 Rev. 08/08	