

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 2010

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.

primary set by \$25.00.					
1. Corporate ID No. 42566	2. Name of Corporation Rhod IS	and Trial TI	ncises Associa	tion la	
3. State of Incorporation RhDW/S/UA	Tanette	bodersland Street Address	re Dorrance Pla	La PCNIGEN	e (21p
5. Foreign corporation. Enter prin	cipal office address		City	State	Zip
6. Brief Description of the character	of the affairs which are act	nally conducted in Rhode Isla	and		
7. NAMES AND ADDRESSES President Name		: ("X" BOX FOR ATTACH	1	ES BEFORE USING ATTA	CHMENTS
Elane Bucci			Das Procacción		
Street Address One Dorchole Plaza			Street Address 250 Benefit St		
	State	02903	Providero	e State RI	²⁴ 02903
Ed Parke			Treasurer Name	A. Bertons	
670 New London Ave			One Dorrance Plaza		
Clausian	State RI	02920	(CH) POVIclem	State	Z# OL903
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-Director Name					<u>EE</u> (3). R.I.G.L. 7-6-23
Elaine B	ucci		Dan Pa	Deaccini	
One Dome	ance Plane		Street Address 250 BC	inelit St	
an Providence	State RT	W OLA B	Pandere	1 State C_I	24p
Director Name Ed Par	ter		Director Name	A. Berta	(55
Street Address D New	London 6	Are	Street Address DOCT	-ance Pluza	
C(Q~ ST) 9. REGISTERED AGENT IN 1	State RI	²³⁰ 02920	Providence	State RI	02903
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					
			dent, Secretary, Assistant		

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FOR	SECRETARY OF STATE U	SE ONLY

Inder penalty of perjury. I declare and affirm that I have examined this port, including any accompanying schedules and statements, and that all
attements contained herein are true and correct.
Janette A. Bertoess
rini or Type Name of Officer TCeASUCC
itle of Officer