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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 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.*

1. Corporate ID No.	2. Name of Corporation		
29044	VNS HomeCare, Inc.		
3. State of Incorporation	4. Corporate address in Rhode Island - Street Address	City	Zip
Rhode Island	14 Woodruff Avenue, Suite 7	Narragansett	02882
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

Home Health Care

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

President Name			Vice President Name		
Mary Lou Rhodes			None		
Street Address			Street Address		
14 Woodruff Avenue, Suite 7					
City	State	Zip	City	State	Zip
Narragansett	RI	02882			
Secretary Name			Treasurer Name		
Linda Butcher			None		
Street Address			Street Address		
128 South Road					
City	State	Zip	City	State	Zip
Wakefield	RI	02879			

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		
Joseph Matthews			Laura Harris		
Street Address			Street Address		
3103 Old Post Road			2625E Commodore Perry Highway		
City	State	Zip	City	State	Zip
Wakefield	RI	02879	Wakefield	RI	02879
Director Name			Director Name		
Jason Marshall			Meg Sisco		
Street Address			Street Address		
14 Woodruff Avenue			6 North Stuart Street		
City	State	Zip	City	State	Zip
Narragansett	RI	02882	Westerly	RI	02891

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

[redacted] 29044 FILED

File Date MAY 18 2010

Check No. BY 2690

By:

FOR SECRETARY OF STATE USE ONLY
48788-10-499260

[redacted]

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.

Mary Lou Rhodes 5/7/2010
Signature of Officer *Date*

Mary Lou Rhodes
Print or Type Name of Officer

[redacted] President
Title of Officer

Form 631 Rev. 09/17