



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

Fee: \$20.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Foreign Non-Profit
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: 2010

1. Corporate ID No. 000024610

2. Name of Corporation MUSCULAR DYSTROPHY ASSOCIATION, INC.

3. State of Incorporation

State: NY

4. Corporate Address in Rhode Island

No. and Street: 931 JEFFERSON BOULDVARD
UNIT 1005

City or Town: WARWICK

State: RI Zip: 02886 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 3300 EAST SUNRISE DRIVE

City or Town: TUCSON State: AZ Zip: 85718 Country: USA

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

TO FOSTER AND PROMOTE THE CURE AND ALLEVIATION OF THE CONDITIONS OF PERSONS SUFFERING FROM DISEASES OF MUSCLE AND/OR NERVE

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
OTHER OFFICER	VALERIE Cwik MD	3300 EAST SUNRISE DRIVE TUCSON, AZ 85718 USA
ASSISTANT SECRETARY	GAIL SCHMERTZ KERNER ESQ.	3300 EAST SUNRISE DRIVE TUCSON, AZ 85718 USA
OTHER OFFICER	KEVIN MORAN	3300 EAST SUNRISE DRIVE

		TUCSON, AZ 85718 USA
VICE PRESIDENT	PETE MORGAN	3300 EAST SUNRISE DRIVE TUCSON, AZ 85718 USA
ASSISTANT TREASURER	STEPHEN P EVANS CPA	3300 EAST SUNRISE DRIVE TUCSON, AZ 85718 USA
ASSISTANT SECRETARY	CHRISTINA C KENNEDY	3300 EAST SUNRISE DRIVE TUCSON, AZ 85718 USA
ASSISTANT TREASURER	JODI WALTERS	3300 EAST SUNRISE DRIVE TUCSON, AZ 85718 USA
PRESIDENT	GERALD C WEINBERG	3300 EAST SUNRISE DRIVE TUCSON, AZ 85718 USA
DIRECTOR	STANLEY H APPEL MD	3300 EAST SUNRISE DRIVE TUCSON, AZ 85718 USA
DIRECTOR	LEON I CHARASH MD	3300 EAST SUNRISE DRIVE TUCSON, AZ 85718 USA
DIRECTOR	BART CONNER	3300 EAST SUNRISE DRIVE TUCSON, AZ 85718 USA
DIRECTOR	BENJAMIN F CUMBO III	3300 EAST SUNRISE DRIVE TUCSON, AZ 85718 USA
DIRECTOR	HAROLD C CRUMP	3300 EAST SUNRISE DRIVE TUCSON, AZ 85718 USA
DIRECTOR	JOSEPH S DIMARTINO	3300 EAST SUNRISE DRIVE TUCSON, AZ 85718 USA
DIRECTOR	DANIEL G FRIES	3300 EAST SUNRISE DRIVE TUCSON, AZ 85718 USA
DIRECTOR	THE HONORABLE BRAD HENRY	3300 EAST SUNRISE DRIVE TUCSON, AZ 85718 USA
OFFICER	R. RODNEY HOWELL MD	3300 EAST SUNRISE DRIVE TUCSON, AZ 85718 USA
DIRECTOR	DAVE HUTTON	3300 EAST SUNRISE DRIVE TUCSON, AZ 85718 USA
DIRECTOR	LOUIS M KUNKEL PH.D.	3300 EAST SUNRISE DRIVE TUCSON, AZ 85718 USA
TREASURER	SUZANNE LOWDEN	3300 EAST SUNRISE DRIVE TUCSON, AZ 85718 USA
SECRETARY	TIMMI MASTERS	3300 EAST SUNRISE DRIVE TUCSON, AZ 85718 USA
DIRECTOR	MAUREEN MCGOVERN	3300 EAST SUNRISE DRIVE TUCSON, AZ 85718 USA
OFFICER	OLIN F MORRIS	3300 EAST SUNRISE DRIVE TUCSON, AZ 85718 USA
DIRECTOR	CHRISTOPHER J ROSA PH.D.	3300 EAST SUNRISE DRIVE TUCSON, AZ 85718 USA
DIRECTOR	CHARLES D SCHOOR ESQ.	3300 EAST SUNRISE DRIVE TUCSON, AZ 85718 USA
OFFICER	LOIS R WEST	3300 EAST SUNRISE DRIVE TUCSON, AZ 85718 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

CT CORPORATION SYSTEM 155 SOUTH MAIN STREET, SUITE 301 PROVIDENCE , RI 02903

9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver, or Trustee.

Signed this 24 Day of May, 2010 at 1:41:56 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 § 7-1.2.*

By STEPHEN P. EVANS

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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