



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. 103365		2. Name of Corporation Rhode Island Association for Marriage and Family Therapy, Inc.			
3. State of Incorporation Rhode Island		4. Corporate address in Rhode Island - Street Address 134 Thurbers Avenue		City Providence	Zip 02905
5. Foreign corporation. Enter principal office address N/A		City	State	Zip	
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Peter Rossi, MS, LMFT <i>Peter Rossi, MS, LMFT</i>		Vice President Name Jody Eyre, MS, LMFT <i>Jody Eyre</i>			
Street Address 24 Salt Pond Road, H-6		Street Address 130 Tower Hill Road			
City Wakefield	State RI	Zip 02879	City Wakefield	State RI	Zip 02879
Secretary Name Jason Laurie, MS, LMFT		Treasurer Name Kathleen Levy, MS, LMFT <i>Kathleen Levy, MS, LMFT</i>			
Street Address 24 Salt Pond Road, H-3		Street Address 71 Wildflower Trail			
City Wakefield	State RI	Zip 02879	City Peacedale	State RI	Zip 02883
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> 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 Janet Marquez, MS, LMFT <i>Janet Marquez, MS, LMFT</i>		Director Name Peter Rossi, MS, LMFT <i>Peter Rossi, MS, LMFT</i>			
Street Address 134 Thurbers Avenue		Street Address 24 Salt Pond Road, H-6			
City Providence	State RI	Zip 02905	City Wakefield	State RI	Zip 02879
Director Name Jody Eyre, MS, LMFT		Director Name Kathleen Levy, MS, LMFT			
Street Address 130 Tower Hill Road		Street Address 71 Wildflower Trail			
City Wakefield	State RI	Zip 02879	City Peacedale	State RI	Zip 02883
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

FILED

File Date JUN 16 2010
Check No. _____
By: BY 239
FOR SECRETARY OF STATE USE ONLY

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.

Peter Rossi 6-11-10
Signature of Officer Date

PETER ROSSI, MS, LMFT

Print or Type Name of Officer

PRESIDENT

Title of Officer