RI SOS Filing Number: 201064608700 Date: 07/02/2010 4:00 PM

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

A. Ralph Mollis, *Secretary of Stat*
Corporations Divisio
148 W. River Stree
Providence, RI 02904-261
401.222.304

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		
159490	SOUTH COUNTY DENTAL SOCIETY		
3. State of Incorporation	4. Corporate address in Rhode Island - Street Address	City	Zip
R.I.	P.O. BOX 2058 11 Wells Street	Westerly	02891
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

Monthly meetings to keep members aware of dental concerns within the state.

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

President Name	Vice President Name
Ian Silversmith	Rebecca J. Woodward DMD
Street Address: 1130 Ten Rod Rd. Suite A-104	Street Address: 11 Wells St
City: North Kingstown State: RI Zip: 02852	City: Westerly State: RI Zip: 02891
Secretary Name	**Treasurer Name**
Frank DeQuatro	Donna Hagerty
Street Address: 24 Salt Pond Rd C-1	Street Address: 24 Salt Pond Rd. E3
City: Wakefield State: RI Zip: 02879	City: Wakefield State: RI Zip: 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
Robert Hayden DMD	Dante Julino
Street Address: 5 Crestview Circle	Street Address: 85 Beach Street
City: Westerly State: RI Zip: 02891	City: Westerly State: RI Zip: 02891
Director Name	**Director Name**
Adam Kaufman DMD	Christine Benoit
Street Address: 11 Well Street	Street Address: 4995 S. County Trail
City: Westerly State: RI Zip: 02891	City: Charlestown State: RI Zip: 02813

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] [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.

Rebecca J. Woodward 6-28-2010
Signature of Officer *Date*

Rebecca J. Woodward
Print or Type Name of Officer

Vice President
Title of Officer

File Date 7-2-2010
Check No. 1366
By: mnc
50879-16-536118
FOR SECRETARY OF STATE USE ONLY

[redacted]

Form 631 Rev. 09/17