



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

**Non-Profit Corporation  
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:** 2011

**1. Corporate ID No.** 000164417

**2. Name of Corporation** American Academy of Addiction Psychiatry

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 400 MASSASOIT AVENUE  
SUITE 307

City or Town: EAST PROVIDENCE State: RI Zip: 02914 Country: USA

**5. Foreign Corporation. Enter Principal Office Address**

No. and Street:

City or Town: State: Zip: Country:

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

CHARITABLE EDUCATIONAL AND SCIENTIFIC ACTIVITIES

**7. Names and Addresses of the Officers and Directors:**

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	JOSEPH LIBERTO	10 NORTH GREENE ST - 116A BALTIMORE, MD 21201
TREASURER	LAURENCE M. WESTREICH MD	275 CENTRAL PARK WEST APT 1A NEW YORK, NY 10024 US
SECRETARY	SHELLY F GREENFIELD MD, MPH	115 MILL STREET BELMONT, MA 02478 US
CEO	KATHRYN L. CATES WESSEL	400 MASSASOIT AVENUE, SUITE 307 EAST PROVIDENCE, RI 02914 USA
DIRECTOR	JOHN MARIANI MD	1051 RIVERSIDE DRIVE NEW YORK, NY 10032 US
DIRECTOR	FRANCES R. LEVIN MD	1051 RIVERSIDE DRIVE UNIT 66 NEW YORK, NY 10032 US
DIRECTOR	RICHARD K. RIES MD	359911 HARBORVIEW MEDICAL CENTER, 325 NINTH AVE SEATTLE, WA 98104 US
DIRECTOR	ISMENE PETRAKIS MD	950 CAMPBELL AVE WEST HAVEN, CT 06516 US
DIRECTOR	JOHN A RENNER MD	251 CAUSEWAY ST BOSTON, MA 02114 US
DIRECTOR	RICHARD N ROSENTHAL MD	1090 AMSTERDAM AVE, 16TH FL NEW YORK, NY 10025 US
DIRECTOR	LAURA F MCNICHOLAS MD, PHD	BEH.HEALTH 7 EAST (116), UNIVERSITY & WOODLAND AVE PHILADELPHIA, PA 19104 US
DIRECTOR	SHELDON I MILLER MD	9441 CENTRAL PARK AVE EVANSTON, IL 60203 US
DIRECTOR	STEPHEN ROSS MD	34 KANE AVE LARCHMONT, NY 10538 US

**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**

KATHRYN CATES-WESSEL 400 MASSASOIT AVENUE, SUITE 307 EAST PROVIDENCE , RI 02914

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

**Signed this 20 Day of May, 2011 at 9:30:34 AM.** *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 § 7-6.*

By KATHRYN CATES-WESSEL  
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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