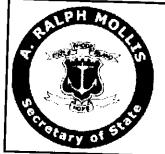
Fee: \$20.00



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

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

You-Profit Corporation Mandai Beport 2019 图 多名的 10 mm 1 - 10 mm 20

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| ANNUAL REPORT YEAR: 2011   |                |                   |              |                   |                 |
|--|----------------|-------------------|--------------|-------------------|-----------------|
| 1. Corporate ID No. 000028459  | <del>-</del>   |                   |              |                   |                 |
| 2. Name of Corporation Adoption Rhode Island   |                |                   |              | =                 |                 |
| 3. State of Incorporation  |                |                   |              |                   |                 |
| State: <u>RI</u>   |                |                   |              | <u>3</u>          |                 |
| 4. Corporate Address in Rhode Island   |                |                   |              | # <u>#</u> 9:     |                 |
| No. and Street: 2 BRADFORD STREET  |                |                   |              | 16                | <b>Z</b>        |
| City or Town: PROVIDENCE   | State: RI      | Zip: <u>02903</u> | Country:     | USÆ               | 4               |
| 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   | ch are Actua   | Ily Conducted     | in Rhode     | Islan(            |                 |
| RECRUITMENT OF ADOPTIVE FAMILIES FOR S   |                | EEDS CHILI        | <u>DREN.</u> |                   |                 |
| 7. Names and Addresses of the Officers and Directors:  |                |                   |              |                   |                 |
| All officers and directors must be listed. If officers an<br>Incorporator is no longer applicable; please delete | ıd/or director | rs have been e    | ected, the   | title             |                 |
| THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)COR<br>7-6-23   | RPORATION SHA  | LL NOT BE LESS    | THAN THREE   | <b>፤(3). R</b> .i | l. <b>G</b> .L. |

**FILED** 

|  |   | 5/  |
|--|---|---|
| Title  | Individual Name<br>First, Middle, Last, Suffix  | Address City of Town State 71 2 4 4 2                             |
| PRESIDENT  | DANIEL R BARRY  | Address, City or Town, State, Zip Code, Country  25 STRATFORD AVE |
| TREASURER  | LINDA LYNCH   | NARRAGANSETT, RI 02882 USA<br>120 PROGRESS STREET                 |
| DIRECTOR   | GAYLE GOLDIN  | LINCOLN, RI 02865 USA<br>170 BROWN STREET                         |
| SECRETARY  | Bonna Carage and Av   | PROVIDENCE, RI 02906 USA  |
| VICE PRESIDENT   | DONNA CALDWELL  | P O BOX 1724<br>KINGSTON, RI 02881 USA                            |
| THE TALESTOCK  | WARD PARKER   | 85 TAURUS DRIVE<br>MASHPEE, MA 02649 USA                          |
| DIRECTOR   | MARK BEVINGTON  | 175 MATHEWSON ST  |
| DIRECTOR   | WAYNE CHARNESS  | PROVIDENCE, RI 02903 USA<br>1011 NEWPORT AVENUE                   |
| DIRECTOR   | FRANK CARPANO   | PAWTUCKET, RI 02862<br>6 HERITAGE DRIVE                           |
| DIRECTOR   | BETTY-JO CUGINI   | LINCOLN, RI 02865 USA<br>16 STONE HILL DRIVE                      |
| DIRECTOR   | JAMES LANGEVIN CONGRESSMA   | WESTERLY, RI 02891 USA<br>1270 IVES ROAD                          |
| DIRECTOR   | CHARREL MAXWELL   | WARWICK, RI 02818 USA<br>70 ROBERTA AVENUE                        |
| DIRECTOR   | JOHN OTTAVIANI  | PAWTUCKET, RI 02860 USA   |
| DIRECTOR   | KATHRYN ROBINSON  | 6 N HEREFORD DRIVE<br>CUMBERLAND, RI 02864 USA                    |
| DIRECTOR   | MARCIA RUSSELL-CINTRON  | 87 TRANSIT STREET<br>PROVIDENCE, RI 02906 USA                     |
| DIRECTOR   |   | 33 ASHMONT STREET<br>PROVIDENCE, RI 02905 USA                     |
|  | PAUL SUTTELL HONORABLE  | 515 WEST MAIN RD<br>LITTLE COMPTON, RI 02837 USA                  |
| DIRECTOR   | IAN MACDONALD   | 179 W RIVER ROAD<br>UXBRIDGE, MA 01569 USA                        |
| REGISTERED AGENT IN RHO Changes Require Filing of Fo  DARLENE ALLEN TWO BRADI  | rm 641 - R.I.G.L. 7-6-13 / 7-6  | -78   |
| This report must be signed b   | v either the President Vice P   | President, Secretary, Assistant                                   |
| This report must be signed b<br>Secretary, Treasurer, Receive  | v either the President Vice P   |   |
| This report must be signed be Secretary, Treasurer, Received ser's Contact Information and the a contact name, mailing and Intact Name: Darlene Allen                      | y either the President, Vice Per, or Trustee.   |   |
| This report must be signed be Secretary, Treasurer, Receive er's Contact Information nater a contact name, mailing ad nact Name:  Darlene Allen siness Name: Adoption Rhod | y either the President, Vice Per, or Trustee.  Idress and email.)                       |   |
| This report must be signed be Secretary, Treasurer, Receive er's Contact Information of the a contact name, mailing addition that Name:    Darlene Allen                   | y either the President, Vice Per, or Trustee.  Idress and email.)  Ide Island  OSTREET  |   |
| This report must be signed be Secretary, Treasurer, Received a contact Information and Adoption Rhod and Street:  Darlene Allen Adoption Rhod and Street:  DROVIDENCE      | y either the President, Vice Per, or Trustee.  Idress and email.)  Ide Island  O STREET | President, Secretary, Assistant                                   |
| This report must be signed be Secretary, Treasurer, Received a contact Information and the a contact name, mailing addition Name:    Darlene Allen                         | y either the President, Vice Per, or Trustee.  Idress and email.)  Ide Island  OSTREET  | President, Secretary, Assistant                                   |

Please provide an email address to receive an expedited response from us if the filing is rejected for

any reason. If no email address is provided, we will respond by mail.

| Signed this 10 Day of May, 2011 at 1:44:55 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 § 7-6. |
|--|
| By //Daniel R. Barry// Signature of Officer of the Corporation   |
| X President or Vice President or Secretary or Assistant Secretary or   |
| Treasurer orReceiver orTrustee (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.   |
| Make Corrections   |
| Accept   |
| Form No. 631<br>Revised 09/07  |
|  |
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