



**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: 2011

1. Corporate ID No. 000515215

2. Name of Corporation JSI Research and Training Institute, inc.

3. State of Incorporation

State: MA

4. Corporate Address in Rhode Island

No. and Street: 235 PROMENADE STREET, SUITE 560

City or Town: PROVIDENCE

State: RI Zip: 02908 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 44 FARNSWORTH STREET

City or Town: BOSTON State: MA Zip: 02210 Country: USA

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

CHARITABLE PURPOSES

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
PRESIDENT	JOEL H LAMSTEIN	45 PINECREST ROAD NEWTON , MA 02159 USA
TREASURER	JOEL H LAMSTEIN	45 PINECREST RD NEWTON, MA 02159 USA
CLERK	PATRICIA FAIRCHILD	5 CIRCUIT DR WARREN, MA 02885 USA
ASSISTANT CLERK	JOANNE B MCDADE	10 WALTON ST NO BILLERICA , MA 01862 USA
DIRECTOR	HERBERT S URBACH	70 FULLER BROOK RD WELLESLEY, MA 02482 USA
DIRECTOR	NORBERT HIRSCHHORN	115 GREENCROFT GARDENS LONDON, NW6 3PE UK
DIRECTOR	JOEL H. LAMSTEIN	45 PINECREST RD NEWTON, MA 02159 USA
DIRECTOR	PATRICIA FAIRCHILD	5 CIRCUIT DR WARREN, RI 02885 USA
DIRECTOR	RICHARD C. OWENS	40 OAK HILL ROAD WILLISTON, VT 05495 USA
DIRECTOR	KENNETH J. OLIVOLA	428 MAIN STREET BREWSTER, MA 02631 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

JOHN SNOW, INC. 235 PROMENADE STREET, SUITE 440 PROVIDENCE , RI 02908

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

Signed this 14 Day of June, 2011 at 9:13:23 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 § 7-1.2.*

By JOEL H. LAMSTEIN
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.

