

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

2011

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.

penuny jee of \$25.00.						
1. Corporate ID No.	2. Name of Corporation					
28077	Looking Upwards, Inc.					
3. State of Incorporation	4. Corporate address in Rhode Island - Street Address City			City	Zip	
Rhode Island	Iron Gate	II, 438 East Ma	ain Road	Middletown	02842	
5 Foreign corporation. Enter principal office address			City	State	Zip	
6. Brief Description of the character Providing reside				to persons with	develor-	
mental disabilit	ies				-	
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTA President Name Variables Property Parks 1981)			Vice President Name			
Kathryn Rok						
Street Address (Salve) 100 Ochre Point Avenue			Street Address			
City	State	Zip	City	State	Zip	
Newport	RI	02840				
Secretary Name			Treasurer Name			
Marilvn Thomas			Dennis Layfield			
Street Address			Street Address			
79 Whittier Road			42 Jacqueline Way			
City	State	Zip	City	State	Zip	
Jamestown 8. NAMES AND ADDRESSE	RI S OF THE DIRECTO	02835 RS: ("X" BOX FOR ATTAC	Tivertion	RI CES BEFORE USING ATTA	02878	
Director Name			CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23 Director Name			
Michael Pinto			Dennis Layfield			
Street Address			Street Address			
140 Boulevard			42 Jacqueline Way			
Сиу	State	Zip	Сііу	State	Zip	
Middletown	RI	02842	Tiverton	RI	02878	
Director Name			Director Name			
Dana Kent						
Street Address			Street Address			
87 Girard Avenue						
City	State	Zip	City	State	Zip	
Newport	J RI	02840	l			
9. REGISTERED AGENT IN RHODE ISLAND						
This information is currently	438 Fast Mail	e Brandsecretary of State	C. Changes require filing o	f Form 641 - R.I.G.L. 7-6-13	77-6-78	
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This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

FILED
File Date ILIN 1 G 2011
Check No.
By: 348480_
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that report, including any accompanying schedules and s statements contained herein are true and correct.	
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Signature of Officer	Date
Kathryn Rok	
Print or Type Name of Officer	
President	
Title of Officer	