

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.

penatty jet of \$25.00.						
1. Corporate ID No.	2. Name of Corp					
66896	A Place To Grow, Inc.			City	Zip	
3. State of Incorporation	-	4. Corporate address in Rhode Island - Street Address			02879	
RI	12 High Str			Wakefield	Zip	
5. Foreign corporation. Ente	er principal office addre	SS .	City	State .	Zip	
6. Brief Description of the char	acter of the affairs whic	b are actually conducted in Ri	bode Island			
A child care center that	t services children	6 weeks to 6 years.				
			THE HARVEN TO BELLEN SPACE	S BEFORE USING ATT	ACHMENTS	
7. names and addre	SSES OF THE OF	ICERS: ( A BUA PUR A	Vice President Name		SCENERAL PRESPUENTATION AND INVESTIG	
President Name			Lori Ann Hiener			
Tony Silbert			Street Address			
Street Address			50 George Schaeffer Street			
100 Spartina Cove W	State	Zip	City	State	Ζιp	
Gity		02879	Wakefield	RI	02879	
Wakefield	RI	02018	Treasurer Name			
Secretary Name			Valerie Clifford			
Veronica Bergeson	· <del></del> -		Street Address			
Street Address			87 Spring Street Apt.			
79 Roxanna Lane	State	Zip	City	State	Zip	
City		02881	Wakefield	RI	02879	
Kingston	RI	FCTORS: C"X" BOX FOR	ATTACHMBNT) ∏ FILL IN SPACI		TACHMENTS.	
8. NAMES AND ADDRI	TOTOBE OF A DO	MESTIC (PHONE ISIA	ND) CORPORATION SHALL NO	OT BE LESS THAN TH	<u>REE</u> (3). R.I.G.L. 7-6-2.	
	ELIUKS OF A DO		Director Name	meer <del>for the end of the second</del>	ALL	
Director Name			Peter Evans			
Lora Choquette			Street Address			
Street Address			60 Meadowbrook Road			
365 Woodruff Avenu		Zip	City	State	Zip	
City	State	02879	Richmond	l <sub>RI</sub>	02898	
Wakefield	RI	02018	Director Name			
Director Name			Keith Wahl			
Rajan Ray			Street Address			
Street Address			61 Arrowhead Trail			
27 Eldred Court	C+-4	Zip	City	State	Zip	
City	State	02879	South Kingstown	RI	02879	
Wakefield	RI					
9. REGISTERED AGEN			din 1955- a did denote il 15 second a nº - 4-15, second deserving especialists	500 187 VARGOSSON ABELLISH AV		
This information is curre	ently of record in th	e Office of the Secretary	of State. Changes require filing of	Form 641 - R.I.G.L. 7-6	-13/7-6-78	
		-ith on the Brasidant Vic	ce President, Secretary, Assistant	Secretary, Treasurer, R	eceiver or Trustee	
This report	must be signed by	eimer me President, vic	oo 1 1031done, Goorotary, Aconstant	,,		

<b>-</b> 66826
File Date  JUL 0.1 2011  Check No.  RY  FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that report, including any accompanying schedules and s	I have examined this statements, and that all
statements contained herein are true and correct.	6/29/201
Signature of Officer	Date
Veronica Bergeson Print or Type Name of Officer	
Secretary	
Title of Officer	Form 631 Rev. 09/17