RI SOS Filing Number: 201180938660 Date: 07/07/2011 4:00 PM

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

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.*

1. Corporate ID No.	2. Name of Corporation		
65676	RI Committee on Occupational Safety and Health		
3. State of Incorporation	4. Corporate address in Rhode Island - Street Address	City	Zip
Rhode Island	741 Westminister Street	Providence	RI
5. **Foreign corporation.** Enter principal office address	City	State	Zip

6. Brief Description of the character of the affairs which are actually conducted in Rhode Island
Occupational Safety and Health Resource Center

7. NAMES AND ADDRESSES OF THE OFFICERS: *("X" BOX FOR ATTACHMENT)* ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name	Vice President Name
Karen McAninch	None
Street Address	Street Address
90 Printery Street	
City / State / Zip	City / State / Zip
Providence / RI / 02904	
Secretary Name	Treasurer Name
Rick Brooks	Timothy Schick
Street Address	Street Address
375 Branch Avenue	278 Westminster Street
City / State / Zip	City / State / Zip
Providence / RI / 02904	Providence / RI / 02903

8. NAMES AND ADDRESSES OF THE DIRECTORS: *("X" BOX FOR ATTACHMENT)* ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

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

Director Name	Director Name
James Celenza	Paddy Dennehy
Street Address	Street Address
741 Westminister Street	108 Ivy Street
City / State / Zip	City / State / Zip
Providence / RI / 02903	Providence / RI / 02906
Director Name	Director Name
Michael Mullane	
Street Address	Street Address
356 Smith Street	
City / State / Zip	City / State / Zip
Providence / RI / 02908	

9. REGISTERED AGENT IN RHODE ISLAND

This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-78

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

[redacted] [redacted]

FILED
File Date _____
Check No. JUL 07 2011
By: BY 6178
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Tim Schick — 7/2/11
Signature of Officer — *Date*

Timothy Schick
Print or Type Name of Officer

Treasurer
Title of Officer

[redacted]

Form 631 Rev. 09/17

65278-16-659540