



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 02909-2615  
401.222.3040

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2007**

**Filing Period:** January 1 - March 1 • **Filing Fee:** \$50.00\* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

\* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. <b>39481</b>		2. Name of Corporation <b>Primary Care Centers of New England</b>			
3. Street Address Principal Business Office <b>111 Brewster Street</b>			City <b>Pawtucket</b>	State <b>RI</b>	Zip <b>02860</b>
4. Business Phone No. <b>(401) 729-2139</b>		5. State of Incorporation <b>Rhode Island</b>			
6. Brief Description of the Character of Business Conducted in Rhode Island <b>To provide preventative health care and educational services.</b>					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name <b>Francis R. Dietz</b>			Vice President Name <b>None</b>		
Street Address <b>111 Brewster Street</b>			Street Address		
City <b>Pawtucket</b>	State <b>RI</b>	Zip <b>02860</b>	City	State	Zip
Secretary Name <b>Edna Poulin</b>			Treasurer Name <b>Robert Andrade</b>		
Street Address <b>3 Capitol Hill</b>			Street Address <b>1200 Central Avenue</b>		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02908</b>	City <b>Pawtucket</b>	State <b>RI</b>	Zip <b>02861</b>
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name <b>Francis R. Dietz</b>			Director Name <b>Alfred Degen</b>		
Street Address <b>111 Brewster Street</b>			Street Address <b>7 Buckboard Drive</b>		
City <b>Pawtucket</b>	State <b>RI</b>	Zip <b>02860</b>	City <b>Cumberland</b>	State <b>RI</b>	Zip <b>02864</b>
Director Name <b>Edna Poulin</b>			Director Name <b>None</b>		
Street Address <b>3 Capitol Hill</b>			Street Address		
City <b>Providence</b>	State <b>RI</b>	Zip <b>02908</b>	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares <b>8,000</b>	Class, Series <b>Common</b>	Par Value <b>1.00</b>

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This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

**FILED**

FEB 02 2012

BY Francis R. Dietz

File Date \_\_\_\_\_  
Check No. \_\_\_\_\_  
By: \_\_\_\_\_  
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.

Francis R. Dietz  
Signature Date Jan 23, 2012

**Francis R. Dietz**

Print or Type Name

**President/CEO**

Title