



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

**Non-Profit Corporation  
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.** 000083609

**2. Name of Corporation** SSTAR of Rhode Island, Inc.

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 1950 TOWER HILL ROAD

City or Town: NORTH KINGSTOWN

State: RI Zip: 02852 Country: USA

**5. Foreign Corporation. Enter Principal Office Address**

No. and Street:

City or Town: State: Zip: Country:

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

TO PROVIDE COMPREHENSIVE COMMUNITY BASED SERVICES FOR THE PREVENTION, TREATMENT AND CONTROL OF SUBSTANCE ABUSE.

**7. Names and Addresses of the Officers and Directors:**

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

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

| <b>Title</b>   | <b>Individual Name</b><br>First, Middle, Last, Suffix | <b>Address</b><br>Address, City or Town, State, Zip Code, Country |
|----------------|---|---|
| PRESIDENT      | ARTHUR SAMPSON  | 164 SUMMIT AVE.<br>PROVIDENCE, RI 02906 USA                       |
| TREASURER      | PATRICIA HAYES  | 465 SPRING ST.<br>NEWPORT, RI 02840 USA                           |
| SECRETARY      | PATRICIA HAYES  | 465 SPRING ST.<br>NEWPORT, RI 02840 USA                           |
| VICE PRESIDENT | LUBA DUMENCO MD                                       | 127 HIGHLAND RD.<br>TIVERTON, RI 02878 USA                        |
| DIRECTOR       | ARTHUR SAMPSON  | 164 SUMMIT AVE.<br>PROVIDENCE, RI 02906 USA                       |
| DIRECTOR       | LUBA DUMENCO MD                                       | 127 HIGHLAND RD.<br>TIVERTON, RI 02878 USA                        |
| DIRECTOR       | PATRICIA HAYES  | 465 SPRING ST.<br>NEWPORT, RI 02840 USA                           |
| DIRECTOR       | RICHARD HUNT  | 26 OLD RACCOON HILL RD.<br>WEST GREENWICH, RI 02817 USA           |
| DIRECTOR       | WILLIAM H. HUTSON PH.D.                               | BOX 221<br>LITTLE COMPTON, RI 02837 USA                           |
| DIRECTOR       | MARIA SEASTRUNK                                       | 62 LOCUST ST.<br>PROVIDENCE, RI 02906 USA                         |
| DIRECTOR       | BARBARA MURRAY  | 803 LAKE RD.<br>TIVERTON, RI 02878 USA                            |
| DIRECTOR       | MICHAEL STEIN MD                                      | 345 BLACKSTONE BLVD.<br>PROVIDENCE, RI 02906 USA                  |
| DIRECTOR       | J. GREGORY PRIOR                                      | 100 SAKONNET POINT RD.<br>LITTLE COMPTON, RI 02837 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**

PATRICIA N. EMSELLEM 1950 TOWER HILL ROAD NORTH KINGSTOWN , RI 02852-

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

**Signed this 9 Day of February, 2012 at 11:39:02 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 § 7-6.*

By PATRICIA HAYES  
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.**

Form No. 631  
Revised 09/07

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