



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: 2012

1. Corporate ID No. 000164417

2. Name of Corporation American Academy of Addiction Psychiatry

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 400 MASSASOIT AVENUE
SUITE 307

City or Town: EAST PROVIDENCE State: RI Zip: 02914 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

CHARITABLE EDUCATIONAL AND SCIENTIFIC ACTIVITIES

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	JOSEPH LIBERTO	10 NORTH GREENE ST - 116A BALTIMORE, MD 21201
PRESIDENT	FRANCES R LEVIN MD	1051 RIVERSIDE DRIVE UNIT 66 NEW YORK, NY 10032 USA
TREASURER	LAURENCE M. WESTREICH MD	275 CENTRAL PARK WEST APT 1A NEW YORK, NY 10024 US
CEO	KATHRYN L. CATES WESSEL	400 MASSASOIT AVENUE, SUITE 307 EAST PROVIDENCE, RI 02914 USA
VICE PRESIDENT	SHELLY F GREENFIELD MD	115 MILL STREET BELMONT, MA 02478 USA
DIRECTOR	LAURA MCNICHOLAS MD, PHD	7 EAST 116 3900 WOODLAND AVENUE PHILADELPHIA, PA 19104 USA
DIRECTOR	KAREN P.G. DREXLER MD	1670 CLAIRMONT RD. DECATUR, GA 30033 USA
DIRECTOR	KEVIN A SEVARINO MD, PHD	116A3 55 WILLARD AVE NEWINGTON, CT 06111 USA
DIRECTOR	JOHN MARIANI MD	1051 RIVERSIDE DRIVE NEW YORK, NY 10032 US
DIRECTOR	ISMENE PETRAKIS MD	950 CAMPBELL AVE WEST HAVEN, CT 06516 US
DIRECTOR	JOHN A RENNER MD	251 CAUSEWAY ST BOSTON, MA 02114 US
DIRECTOR	RICHARD N ROSENTHAL MD	1090 AMSTERDAM AVE, 16TH FL NEW YORK, NY 10025 US
DIRECTOR	LAURA F MCNICHOLAS MD, PHD	BEH.HEALTH 7 EAST (116), UNIVERSITY & WOODLAND AVE PHILADELPHIA, PA 19104 US

**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**

KATHRYN CATES-WESSEL 400 MASSASOIT AVENUE, SUITE 307 EAST PROVIDENCE , RI 02914

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

Signed this 10 Day of May, 2012 at 4:44:05 PM. *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 KATHRYN L. CATES-WESSEL
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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