



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. 000157649

2. Name of Corporation Thundermist Foundation

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 450 CLINTON STREET

City or Town: WOONSOCKET

State: RI Zip: 02895 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 SUPPORT THE MISSION OF THUNDERMIST HEALTH CENTER THAT OPERATES
COMMUNITY HEALTH CENTERS

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
TREASURER	M DOUGLAS FAY	53 DORRANCE STREET PROVIDENCE, RI 02903 USA
SECRETARY	LINDA M CANNISTRA	87 RIDGE ROAD SMITHFIELD, RI 02917 USA
CHAIR	BRENDAN KANE	20 NEWMAN AVE - STE 1005 RUMFORD, RI 02916 USA
VICE CHAIR	SCOTT SEABACK	56 MAPLE STREET WARWICK, RI 02888 USA
DIRECTOR	MICHAELA BROCKMANN	223 BAYVIEW AVENUE EAST GREENWICH, RI 02818 USA
DIRECTOR	JOHN CIANCIOLO	60 CATAMORE BOULEVARD EAST PROVIDENCE, RI 02914 USA
DIRECTOR	SUSAN DIPRETE	30 WILDFIELD FARM ROAD NARRAGANSETT, RI 02882 USA
DIRECTOR	BRENDAN KANE	20 NEWMAN AVE - STE 1005 RUMFORD, RI 02916 USA
DIRECTOR	COLIN P KANE	20 NEWMAN AVE - STE 1005 RUMFORD, RI 02916 USA
DIRECTOR	SCOTT SEABACK	56 MAPLE STREET WARWICK, RI 02888 USA
DIRECTOR	OLIVER BRADY	175 HILLSIDE ROAD CRANSTON, RI 02920 USA
DIRECTOR	BRIAN KELLEHER	5 PHEASANT HILL ROAD NORFOLK, MA 02056 USA
DIRECTOR	AN LE	ONE CITIZENS PLAZA PROVIDENCE, RI 02903 USA
DIRECTOR	LINDA M CANNISTRA	87 RIDGE ROAD SMITHFIELD, RI 02917 USA
DIRECTOR	M DOUGLAS FAY	53 DORRANCE STREET PROVIDENCE, RI 02903 USA
DIRECTOR	CHUCK JONES	41 PLAIN STREET ATTLEBORO, MA 02703 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**

DON E. WINEBERG, ESQ. ONE PARK ROW, SUITE 300 PROVIDENCE , RI 02903-

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

Signed this 31 Day of May, 2012 at 9:28:35 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 LINDA M. CANNISTRA
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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