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. 000030895

2. Name of Corporation Day One

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 100 MEDWAY STREET
City or Town: PROVIDENCE   State: RI   Zip: 02906 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

COUNSELING, EDUCATION, CRISIS INTERVENTION, SOCIAL SERVICES

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 If officers and/or directors have been elected, the title   Incorporator is no longer applicable; please delete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	PETER LOESCHER	LOESCHER, ROSE & COMPANY, 128 DORRANCE STREET, SUITE 52 PROVIDENCE, RI 02903 USA
TREASURER	BARBARA BENNETT	JOHNSON & WALES UNIVERSITY, 8 ABBOTT PARK PLACE PROVIDENCE, RI 02903 USA
SECRETARY	SUSAN CONNERY	JOHNSON & WALES UNIVERSITY, 8 ABBOTT PARK PLACE PROVIDENCE, RI 02903 USA
DIRECTOR	BEVERLY LEDBETTER ESQ.	BROWN UNIVERSITY, 110 SOUTH MAIN STREET PROVIDENCE, RI 02903 USA
DIRECTOR	INGLISH MORGAN-GARDNER PHD	SALVE REGINA UNIVERSITY, MCAULEY HALL, ROOM 211 NEWPORT, RI 02840 USA
DIRECTOR	RALPH LIGUORI ESQ	COOLEY MANION JONES LLP, 1 CENTER PLACE PROVIDENCE, RI 02903 USA
DIRECTOR	SCOTT FRASER	FRASER COMMUNICATIONS GROUP, 9 SUDDARD LANE NORTH SCITUATE, RI 02857 USA
DIRECTOR	JAMES GALLAGHER	BLUE CROSS BLUE SHIELD OF RI, 444 WESTMINSTER ST. PROVIDENCE, RI 02903 USA
DIRECTOR	MICHELE CINQUEGRANO	VERIZON EXTERNAL AFFAIRS, 234 WASHINGTON STREET PROVIDENCE, RI 02903 USA
DIRECTOR	PATRICIA ELMER	TEXTRON INC., 40 WESTMINSTER STREET PROVIDENCE, RI 02903 USA
DIRECTOR	MARY DONNELLY	WOMEN & INFANTS HOSPITAL, 101 DUDLEY STREET PROVIDENCE, RI 02905 USA
DIRECTOR	DR JULIA JORDAN-ZACHERY	PROVIDENCE COLLEGE 1 CUNNINGHAM SQUARE PROVIDENCE, RI 02918 USA
DIRECTOR	CHRIS SANTILLI	400 WESTMINSTER STREET, SUITE 600 PROVIDENCE, RI 02903 USA
DIRECTOR	ROXANNE VREES MD	WOMEN & INFANTS HOSPITAL 101 DUDLEY STREET PROVIDENCE, RI 02905 USA
DIRECTOR	JAMES HULL	CVS/CAREMARK, ONE CVS DRIVE WOONSOCKET, RI 02895 USA
DIRECTOR	KATHY O'DONNELL	CITIZENS FINANCIAL GROUP , ONE CITIZENS PLAZA PROVIDENCE, RI 02903 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

   PEG LANGHAMMER 100 MEDWAY STREET PROVIDENCE , RI 02906-

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

Signed this 19 Day of June, 2012 at 2:49:04 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 PETER LOESCHER
     Signature of Officer of the Corporation

X 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