



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. 000542221

2. Name of Corporation Tourette Syndrome Association of Rhode Island, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: P.O. BOX 28231

City or Town: PROVIDENCE State: RI Zip: 02908 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 PROMOTE A GREATER AWARENESS, EDUCATION AND UNDERSTANDING ABOUT
TOURETTE SYNDROME AND RELATED 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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	GILBERT BRICAULT	8 KITCHENER ROAD JOHNSTON, RI 02919 USA
TREASURER	ERIN E TODISCO-PLACE	167 JEFFERSON ROAD BURRILLVILLE, RI 02830 USA
SECRETARY	STEPHANIE REGO	6 STONY LANE SMITHFIELD, RI 02917 USA
DIRECTOR	DAVID STRACHMAN	261 FIFTH STREET PROVIDENCE, RI 02906 USA
DIRECTOR	ANN MARIE DELUCA	16 PINEHURST ROAD RIVERSIDE, RI 02915 USA
DIRECTOR	DENISE LAWSON	157 FOSTER CENTER RD. FOSTER, RI 02825 USA
DIRECTOR	MARY SCHATZ	179 ELMGROVE AVE. PROVIDENCE, RI 02906 USA
DIRECTOR	BRIDGET BOURNE	1144 DOUGLAS AVE. APT.#9 NORTH PROVIDENCE, RI 02904 USA
DIRECTOR	STEPHEN COPPOLA	115 RUTH STREET PAWTUCKET, RI 02861 USA
DIRECTOR	BARBARA BARON	175 PROSPECT ST. LINCOLN, RI 02865 USA
DIRECTOR	DEE DEQUATRO	P.O. BOX 28231 PROVIDENCE, RI 02908 USA
DIRECTOR	BETH NEWBERRY	53 FOLLETT STREET NORTH SMITHFIELD, RI 02896 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

GILBERT BRICAULT 95 FREESE STREET PROVIDENCE , RI 02908

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

Signed this 28 Day of June, 2012 at 2:14:23 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 ERIN E. TODISCO-PLACE
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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