



**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

**Foreign Non-Profit
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. 000055490

2. Name of Corporation AMERICAN MASSAGE THERAPY ASSOCIATION

3. State of Incorporation

State: DE

4. Corporate Address in Rhode Island

No. and Street: 10 WEYBOSSET STREET

City or Town: PROVIDENCE

State: RI Zip: 02903 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 500 DAVIS ST.

STE 900

City or Town: EVANSTON

State: IL

Zip: 60201

Country:

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

PROFESSIONAL MEMBERSHIP ORGANIZATION OF MASSAGE THERAPISTS.

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	CYNTHIA RIBEIRO	201 SANDPOINTE AVENUE, SUITE 100 SANTA ANA, CA 92707 USA
SECRETARY	SHELLY JOHNSON	500 DAVIS ST. EVANSTON, IL 60201 USA
DIRECTOR	DOLLY WALLACE	994 W. BROADWAY AVENUE MUSKEGON, MI 49441 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

CT CORPORATION SYSTEM 10 WEYBOSSET STREET PROVIDENCE , RI 02903

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

Signed this 25 Day of October, 2012 at 4:24:26 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 § 7-1.2.*

By SHELLY JOHNSON

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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