



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.** 000164421

**2. Name of Corporation** Just A Touch Rescue Incorporated

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 3980 MENDON ROAD

City or Town: CUMBERLAND State: RI Zip: 02864 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**

PREVENTION OF CRUELTY TO ANIMALS AND CARE AND PROTECTION OF DOGS 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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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	DEBORAH FAHRENHOLTZ	3980 MENDON ROAD CUMBERLAND, RI 02864 USA
TREASURER	DEBORAH FAHRENHOLTZ	3980 MENDON ROAD CUMBERLAND, RI 02864 USA

SECRETARY	LINDA ADAMS	22 OVERHILL ROAD NORTH SCITUATE, RI 02857 USA
DIRECTOR	JACKI INMAN	311 MICHIGAN AVE. DOWAGIAC, MI 49047 USA
DIRECTOR	TERI STORY	3 LYONS STREET FRANKLIN, MA 02038 USA
DIRECTOR	KIRK MANSFIELD	34 COLUMBUS AVENUE BOSTON, MA 02116 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**

DEBORAH FAHRENHOLTZ 3980 MENDON ROAD CUMBERLAND , RI 02864-

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

**Signed this 31 Day of October, 2012 at 11:49:29 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 DEBORAH FAHRENHOLTZ  
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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