



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. 000516476

2. Name of Corporation ST LAURENT INSTITUTE

3. State of Incorporation

State: WA

4. Corporate Address in Rhode Island

No. and Street: 9 LEWIS ST
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

MEDICAL RESEARCH

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	GEORGES C ST LAURENT JR	120 NE 136TH AVE STE 200 VANCOUVER, WA 98684 USA
TREASURER	DANIEL B MYERS-POWER	120 NE 136TH AVE STE 200 VANCOUVER, WA 98684 USA
SECRETARY	DANIEL B MYERS-POWER	120 NE 136TH AVE STE 200 VANCOUVER, WA 98684 USA
VICE PRESIDENT	WILLIAM C ST LAURENT	120 NE 136TH AVE STE 200 VANCOUVER, WA 98684 USA

DIRECTOR	GEORGES C ST LAURENT JR	120 NE 136TH AVE STE 200 VANCOUVER, WA 98684 USA
DIRECTOR	WILLIAM C ST LAURENT	120 NE 136TH AVE STE 200 VANCOUVER, WA 98684 USA
DIRECTOR	EMILE LEVISETTI	120 NE 136TH AVE STE 200 VANCOUVER, WA 98684 USA
DIRECTOR	STEVE BAKALAR	120 NE 136TH AVE STE 200 VANCOUVER, WA 98684 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

NATIONAL REGISTERED AGENTS, INC. 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI 02888

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

Signed this 5 Day of November, 2012 at 5:35:31 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 DANIEL B MYERS-POWER
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

© 2007 - 2012 State of Rhode Island and Providence Plantations
All Rights Reserved