State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, *Secretary of State*
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2013

Filing Period: January 1 - March 1 • Filing Fee: $50.00* **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK**
**** In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of $25.00.***

1. Corporate ID No.	2. Name of Corporation		
101949	Dr. George S. Sehl, Professional Corporation		
3. Street Address Principal Business Office	City	State	Zip
P. O. Box 150	East Greenwich	RI	02818
4. Business Phone No.	5. State of Incorporation		
885-1989	RHODE ISLAND		

6. Brief Description of the Character of Business Conducted in Rhode Island
carry on and conduct the practice of medicine

7. NAMES AND ADDRESSES OF THE OFFICERS: ***("X" BOX FOR ATTACHMENT)*** ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name			Vice President Name		
George S. Sehl D.O.			None		
Street Address			Street Address		
P. O. Box 150					
City	State	Zip	City	State	Zip
East Greenwich	RI	02818			
Secretary Name			Treasurer Name		
George S. Sehl, D.O.			George S. Sehl, D.O.		
Street Address			Street Address		
P. O. Box 150			P. O. Box 150		
City	State	Zip	City	State	Zip
East Greenwich	RI	02818	East Greenwich	RI	02818

8. NAMES AND ADDRESSES OF THE DIRECTORS: ***("X" BOX FOR ATTACHMENT)*** ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

9. SHARES AUTHORIZED ***("X" BOX FOR ATTACHMENT)*** ☐

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value

10. SHARES ISSUED ***("X" BOX FOR ATTACHMENT)*** ☐

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
200	Common	No Par Value

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

FILED

JAN 08 2013

File Date _____

Check No. BY MMC

By: Ck # 2583

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature *Date* 1/5/13

George S. Sehl
Print or Type Name

President
Title

Form 630 Rev. 12/06