



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
 Office of the Secretary of State - Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR** 2013

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.  
 Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. <u>558163</u>		2. Exact name of the Corporation <u>Clinical Services of Rhode Island, Inc.</u>		
3. Principal office address <u>600 Putnam Pike Suite 7</u>		City <u>Greenville</u>	State <u>RI</u>	Zip <u>02828</u>
4. Business Phone No. <u>401-949-2220</u>		5. State of Incorporation <u>Rhode Island</u>		
6. Brief description of the character of business conducted in Rhode Island <u>Substance Abuse - Intensive Outpatient Programs (Evaluation / Consultation / Treatment / Medical Management)</u>				
<b>7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT)</b>				
President Name <u>Reinhard W. Straub</u>		Vice-President Name <u>Reinhard W. Straub</u>		
Street Address <u>24 Carolina Main St.</u>		Street Address <u>24 Carolina Main St.</u>		
City <u>Carolina</u>	State <u>RI</u>	Zip <u>02812</u>	City <u>Carolina</u>	State <u>RI</u>
Secretary Name <u>Reinhard W. Straub</u>		Treasurer Name <u>Reinhard W. Straub</u>		
Street Address <u>24 Carolina Main St.</u>		Street Address <u>24 Carolina Main St.</u>		
City <u>Carolina</u>	State <u>RI</u>	Zip <u>02812</u>	City <u>Carolina</u>	State <u>RI</u>
<b>8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT)</b>				
Director Name <u>Reinhard W. Straub</u>		Director Name		
Street Address <u>24 Carolina Main St.</u>		Street Address		
City <u>Carolina</u>	State <u>RI</u>	Zip <u>02812</u>	City	State
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
<b>9. SHARES AUTHORIZED</b>		<b>10. SHARES ISSUED ("X" BOX FOR ATTACHMENT)</b>		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.		NUMBER OF SHARES	CLASS SERIES	PAR VALUE
		<u>100,000</u>	<u>Common</u>	<u>\$ 0.01 per share</u>

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.

File Date \_\_\_\_\_  
 Check No. \_\_\_\_\_  
 By: \_\_\_\_\_  
 FOR SECRETARY OF STATE USE ONLY

**FILED**  
**MAR 27 2013**  
 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 of Authorized Representative: Reinhard STRAUB  
 Date: 3/26/13  
 BY 1463 Print or Type Name of Authorized Representative