



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: 2013

1. Corporate ID No. 000787823

2. Name of Corporation Breathe For Life

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 245 JACKSON SCHOOLHOUSE RD

City or Town: PASCOAG

State: RI Zip: 02859 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

TO RAISE MONEY FOR RESEARCH FOR CONGENITAL CENTRAL HYPOVENTILATION SYNDROME (CCHS).

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	JESSICA RACHEL DOUCET	267 BRAYTON AVE FALL RIVER, MA 02721 USA
TREASURER	JAIME TESSIER	245 JACKSON SCHOOLHOUSE RD PASCOAG, RI 02859 USA

DIRECTOR	JAIME TERESA TESSIER	245 JACKSON SCHOOLHOUSE RD PASCOAG, RI 02859 USA
DIRECTOR	JOSHUA NORRIS TESSIER	245 JACKSON SCHOOLHOUSE RD PASCOAG, RI 02859 USA
DIRECTOR	VICTOR DOUCET	267 BRAYTON AVE FALL RIVER, MA 02721 USA
DIRECTOR	PAUL TESSIER	86 MILL ST WOONSOCKET, RI 02895 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**

JAIME TESSIER 245 JACKSON SCHOOLHOUSE RD PASCOAG , RI 02859

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

Signed this 11 Day of June, 2013 at 4:35:14 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 § 7-6.*

By JAIME TESSIER

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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