



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. 000105774

2. Name of Corporation R.I ADDULT SUPPORT GROUP

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 4 RIVET DRIVE

City or Town: LINCOLN

State: RI

Zip: 02865

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 ORGANIZE SUPPORT GROUP MEETINGS FOR ADULTS WITH ATTENTION DEFECIT DISORDERS.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	MARIANNE E. RIVET	4 RIVET DRIVE LINCOLN, RI 02865 USA
TREASURER	MARIANNE E. RIVET	4 RIVET DRIVE LINCOLN, RI 02865 USA

SECRETARY	SHARON D. EISMAN	57 BOKAR STREET WARWICK, RI 02886 USA
VICE PRESIDENT	SHARON D. EISMAN	57 BOKAR STREET WARWICK, RI 02886 USA
DIRECTOR	SHARON D. EISMAN	57 BOKAR STREET WARWICK, RI 02886 USA
DIRECTOR	DENNIS FLAVIN	56 CENTRAL STREET NARRAGANSETT, RI 02882 USA
DIRECTOR	MARIANNE E. RIVET	4 RIVET DRIVE LINCOLN, RI 02865 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**

MARIANNE E. RIVET 4 RIVET DRIVE LINCOLN , RI 02865

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

**Signed this 8 Day of July, 2013 at 8:09:32 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 MARIANNE E RIVET  
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 - 2013 State of Rhode Island and Providence Plantations  
All Rights Reserved