



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 2014

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. 113457		2. Exact name of the Corporation New England RMS, Inc.			
3. Principal office address 2374 Post Road, Suite 204		City Warwick	State RI	Zip 02886	
4. Business Phone No. 401-384-6759		5. State of Incorporation RHODE ISLAND			
6. Brief description of the character of business conducted in Rhode Island To provide a full range of services to persons with disabilities.					
7. OFFICERS AND DIRECTORS					
President Name Joseph P. Cozzolino			Vice-President Name Scott Cozzolino		
Street Address 402 East Wilson Bridge Road; Suite A			Street Address 402 East Wilson Bridge Road; Suite A		
City Worthington	State OH	Zip 43085	City Worthington	State OH	Zip 43085
Secretary Name Joseph P. Cozzolino			Treasurer Name Tiffany Cozzolino		
Street Address 402 East Wilson Bridge Road; Suite A			Street Address 402 East Wilson Bridge Road; Suite A		
City Worthington	State OH	Zip 43085	City Worthington	State OH	Zip 43085
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES) (USE BACK PAGE IF NEEDED)					
Director Name Joseph P. Cozzolino			Director Name Scott Cozzolino		
Street Address 402 East Wilson Bridge Road; Suite A			Street Address 402 East Wilson Bridge Road; Suite A		
City Worthington	State OH	Zip 43085	City Worthington	State OH	Zip 43085
Director Name Tiffany Cozzolino			Director Name		
Street Address 402 East Wilson Bridge Road; Suite A			Street Address		
City Worthington	State OH	Zip 43085	City	State	Zip
9. SHARES AUTHORIZED					
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.			10. SHARES ISSUED		
			NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
			750	COMMON	\$.01

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

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.

Joseph P. Cozzolino 2-26-14
Signature of Authorized Representative Date
Joseph P. Cozzolino
Print or Type Name of Authorized Representative

FILED
MAR 03 2014
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