



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

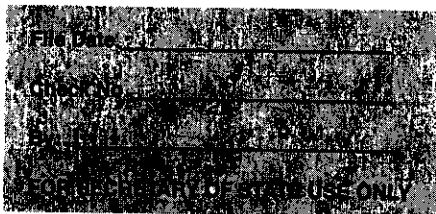
PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **2014**

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. 142980		2. Exact name of the Corporation The Cedar Institute, Inc.				
3. Principal office address 124 Hideaway Lane			City North Kingstown	State RI	Zip 02852	
4. Business Phone No. 401-667-7236		5. State of Incorporation Rhode Island				
6. Brief description of the character of business conducted in Rhode Island Consulting in the field of healthcare						
7. PRESIDENT (NAME AND ADDRESS) (X) BOX FOR ATTACHMENT <input type="checkbox"/>						
President Name Mary Salisbury			Vice-President Name James D. Salisbury			
Street Address 124 Hideaway Lane			Street Address 124 Hideaway Lane			
City North Kingstown	State RI	Zip 02852	City North Kingstown	State RI	Zip 02852	
Secretary Name Mary Salisbury			Treasurer Name Mary Salisbury			
Street Address 124 Hideaway Lane			Street Address 124 Hideaway Lane			
City North Kingstown	State RI	Zip 02852	City North Kingstown	State RI	Zip 02852	
8. BOARD OF DIRECTORS (NAMES AND ADDRESSES) (X) BOX FOR ATTACHMENT <input type="checkbox"/>						
Director Name None			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						
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 (X) BOX FOR ATTACHMENT <input type="checkbox"/>		
				NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
				100	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
 MAR 17 2014
 2280

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.

Mary L Salisbury 3/14/2014
 Signature of Authorized Representative Date
Mary L Salisbury
 Print or Type Name of Authorized Representative