



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: 2014

1. Corporate ID No. 000486961

2. Name of Corporation Al's House, Incorporated

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 87 WILLOW ROAD

City or Town: CHARLESTOWN

State: RI

Zip: 02813

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

ADULT DAY CARE FOR ALZHEIMERS PATIENTS

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	ANNE MULHALL	87 WILLOW ROAD CHARLESTOWN, RI 02813 USA
TREASURER	BETH IOVINO	44 BEATRICE WARWICK, RI 02889 USA
CLERK	MICHELLE MARIE MULLEN	181 VINEYARD ROAD

		WARWICK, RI 02889 USA
DIRECTOR	ANNE MULHALL	87 WILLOW ROAD CHARLESTOWN, RI 02813 USA
DIRECTOR	SCOTT SEABACK	56 MAPLE STREET WARWICK, RI 02888 USA
DIRECTOR	DAN KIRBY	17 ARLINGTON ST PAWTUCKET, RI 02860 USA
DIRECTOR	JULIA MURPHY	67 OAK HILL NARRAGANSETT, RI 02882 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**

ANNE MULHALL 87 WILLOW ROAD CHARLESTOWN , RI 02813

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

Signed this 29 Day of May, 2014 at 1:21:48 PM by the authorized person. *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 company, 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 ANNE MULHALL
Signature of Authorized Person

Form No. 631
Revised 09/07