



**State of Rhode Island and Providence Plantations
Office of the Secretary of State**

No Fee

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Domestic Non-Profit
Annual Report - Amended**

(Section 7-1.2-1501(e) of the General Laws of Rhode Island, 1956, as amended)

This form is only to be used to amend the current annual report on file with this office.

ANNUAL REPORT YEAR: 2015

1. Corporate ID No. 000861134

2. Name of Corporation 52-S

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: PO BOX 352
City or Town: WYOMING State: RI Zip: 02898 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 PROVIDE EDUCATIONAL, ACADEMIC, SOCIAL, BEHAVIORAL, OCCUPATIONAL THERAPY AND OTHER INSTRUCTIONS AND ASSISTANCE TO CHILDREN WITH SPECIAL NEEDS AND TO FAMILIES WITH SPECIAL NEEDS CHILDREN.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	MICHAEL FOX	42 TALL TIMBERS DR. HOPE VALLEY, RI 02832 USA
DIRECTOR	MICHAEL FOX	42 TALL TIMBERS DRIVE HOPE VALLEY, RI 02832 USA

DIRECTOR	DANIEL BASOV	12 STUYVENSANT OVAL, APT 7A NEW YORK, NY 10009 USA
DIRECTOR	MARCIE BEIGEL	540 PRESIDENT ST. SUITE 1E BROOKLYN, NY 11215 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**

MICHAEL FOX 42 TALL TIMBERS DRIVE HOPE VALLEY , RI 02832

Signed this 23 Day of September, 2015 at 10:29:44 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 NICOLE CIPRIANI-FOX
Signature of Authorized Person

Form No. 631
Revised 09/07

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State of Rhode Island and Providence Plantations
Department of State | Office of the Secretary of State
Nellie M. Gorbea, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island
and Providence Plantations, hereby certify that this document, duly executed in
accordance with the provisions of Title 7 of the General Laws of Rhode Island, as
amended, has been filed in this office on this day:

A handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive, written in a professional style.

Nellie M. Gorbea
Secretary of State

