



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

Fee: \$50.00

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

**Limited Liability Company  
Annual Report**

Filing Period: September 1 - November 1

*In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.*

**ANNUAL REPORT YEAR:** 2015

**1. ID No.** 000148589

**2. Exact Name of the Limited Liability Company** About Families, LLC

**3. State of Formation**

State: RI

**4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island**

COMPREHENSIVE SERVICES FOR CHILDREN WITH SPECIAL NEEDS & THEIR FAMILIES

**5. Principal Office Address**

No. and Street: C/O DALE KLATZKER  
528 NORTH MAIN STREET

City or Town: PROVIDENCE State: RI Zip: 02904 Country: USA

**6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:**

Contact Name: MICHAEL CANCELLIER Contact Title: PRESIDENT/CEO

No. and Street: 203 CONCORD STREET, SUITE 335

City or Town: PAWTUCKET State: RI Zip: 02860 Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.  
DO NOT LIST MEMBERS**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	HELEN MORCOS	610 MANTON AVENUE PROVIDENCE, RI 02909 USA
MANAGER	DALE KLATZKER	528 NORTH MAIN STREET PROVIDENCE, RI 02904 USA
MANAGER	JUNE GRODEN	86 MT HOPE AVENUE PROVIDENCE, RI 02906 USA
MANAGER	JOHN KELLY	1000 EDDY STREET PROVIDENCE, RI 02905 USA

MANAGER	DENISE PATNODE	528 NORTH MAIN STREET PROVIDENCE, RI 02904 USA
MANAGER	GRACE TOE	610 MANTON AVENUE PROVICENCE, RI 02909 USA
MANAGER	BRCE BERNIER MR.	1000 EDDY STREET PROVIDENCE , RI 02905 USA

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

MICHAEL CANCELLIERE 203 CONCORD STREET, SUITE 335 PAWTUCKET , RI 02860

**9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).**

**Signed this 14 Day of October, 2015 at 10:10:29 AM 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 § 7-16.*

By MICHAEL CANCELLIERE  
Signature of Authorized Person

Form No. 632  
Revised 09/07

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