



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

Foreign Business Corporation  
Annual Report

Filing Period: January 1 - March 1

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501 (c&d)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2016

1. Corporate ID No. 001657151

2. Name of Corporation American Addiction Centers, Inc.

3. Street Address Principal Business Office:

No. and Street: 200 POWELL PLACE  
City or Town: BRENTWOOD State: TN Zip: 37027 Country: USA

4. Business Phone No.

6157321366

5. State of Incorporation

State: NV

6. Brief Description of the Character of Business Conducted in Rhode Island

A PARENT COMPANY OF STATE LICENSED RESIDENTIAL MENTAL HEALTH AND SUBSTANCE ABUSE FACILITIES

7. Names and Addresses of the Officers and Directors:

**All officers and directors must be listed.**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
CFO	KIRK R MANZ	200 POWELL PLACE BRENTWOOD, TN 37027 USA
SECRETARY AND GENERAL COUNSEL	KATHRYN SEVIER PHILLIPS	200 POWELL PLACE BRENTWOOD, TN 37027 USA
CHIEF ACCOUNTING OFFICER	ANDREW W MCWILLIAMS	200 POWELL PLACE BRENTWOOD, TN 37027 USA
CEO AND CHAIRMAN	MICHAEL T CARTWRIGHT	200 POWELL PLACE BRENTWOOD, TN 37027 USA

DIRECTOR	MICHAEL T CARTWRIGHT	200 POWELL PLACE BRENTWOOD, TN 37027 USA
DIRECTOR	JERRY BOSTELMAN	200 POWELL PLACE BRENTWOOD, TN 37027 USA
DIRECTOR	LUCIUS E BURCH III	200 POWELL PLACE BRENTWOOD, TN 37027 USA
DIRECTOR	RICHARD E RAGSDALE	200 POWELL PLACE BRENTWOOD, TN 37027 USA
DIRECTOR	DARRELL S FREEMAN SR	200 POWELL PLACE BRENTWOOD, TN 37027 USA

### 8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CWP		\$0.0010	1.00	0

**9. 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.**

**Signed this 25 Day of January, 2016 at 11:52:05 AM.** *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 corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By KATHRYN SEVIER PHILLIPS  
Signature of Authorized Representative of the Corporation

Form No. 630  
Revised 09/07

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