



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

## PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2016

**Filing Period:** January 1 - March 1 • **Filing Fee:** \$50.00\* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

\* 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)(4)) is subject to a penalty fee of \$25.00.

|  |             |  |   |                        |                     |
|--|-------------|--|---|------------------------|---------------------|
| 1. Corporate ID No.<br>17510   |             | 2. Name of Corporation<br>WARREN DENTAL ASSOCIATES, INC. |   |                        |                     |
| 3. Street Address Principal Business Office<br>634 Main Street   |             |  | City<br>Warren  | State<br>RI            | Zip<br>02885        |
| 4. Business Phone No.<br>(401) 245-5825  |             | 5. State of Incorporation<br>Rhode Island                |   |                        |                     |
| 6. Brief Description of the Character of Business Conducted in Rhode Island<br>Dental services to the public.  |             |  |   |                        |                     |
| 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS                          |             |  |   |                        |                     |
| President Name<br>John F. Kerwin   |             |  | Vice President Name<br>Theodore Drummond                            |                        |                     |
| Street Address<br>634 Main Street  |             |  | Street Address<br>634 Main Street                                   |                        |                     |
| City<br>Warren   | State<br>RI | Zip<br>02885   | City<br>Warren  | State<br>RI            | Zip<br>02885        |
| Secretary Name<br>Cathie V. Kerwin   |             |  | Treasurer Name<br>John F. Kerwin                                    |                        |                     |
| Street Address<br>634 Main Street  |             |  | Street Address<br>634 Main Street                                   |                        |                     |
| City<br>Warren   | State<br>RI | Zip<br>02885   | City<br>Warren  | State<br>RI            | Zip<br>02885        |
| 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS                         |             |  |   |                        |                     |
| Director Name<br>John F. Kerwin  |             |  | Director Name<br>Theodore Drummond                                  |                        |                     |
| Street Address<br>634 Main Street  |             |  | Street Address<br>634 Main Street                                   |                        |                     |
| City<br>Warren   | State<br>RI | Zip<br>02885   | City<br>Warren  | State<br>RI            | Zip<br>02885        |
| Director Name<br>None  |             |  | Director Name<br>None   |                        |                     |
| Street Address   |             |  | Street Address  |                        |                     |
| City   | State       | Zip  | City  | State                  | Zip                 |
| 9. SHARES AUTHORIZED   |             |  | 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> |                        |                     |
| 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. |             |  | ISSUED SHARES — THIS SECTION <u>MUST</u> BE COMPLETED               |                        |                     |
|  |             |  | Number of shares<br>100   | Class/Series<br>Common | Par Value<br>No Par |
|  |             |  |   |                        |                     |

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 03 2016

KL 11335

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.

Signature

John F. Kerwin

Print or Type Name

President

Title

Date

2/25/16

File Date

Check No.

By:

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