| State of | of Rhode Island and Pro Office of the Secreta | | Fee: \$20.00 |
|--|--|---|--------------|
| Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040 | | | |
| TOPE | | | |
| Foreign Non-Profit Annual Report Filing Period: June 1 - June 30 | | | |
| In accordance with R.I.G.L. 7-6-94 report within the time prescribed b \$25.00. | | | |
| ANNUAL REPORT YEAR: 2016 | | | |
| 1. Corporate ID No. 000963976 | | | |
| 2. Name of Corporation Youth Advocate Programs, Inc. | | | |
| 3. State of Incorporation | | | |
| State: PA | | | |
| 4. Corporate Address in Rhode Island | | | |
| No. and Street:2007 N THIRD STREETCity or Town:HARRISBURGState: RIZip: 17102Country: USA | | | |
| 5. Foreign Corporation. Enter Principal Office Address | | | |
| No. and Street: 2007 NORTH THIRD ST | | | |
| City or Town: <u>HARRISBURG</u> State: <u>PA</u> Zip: <u>17102</u> Country: <u>USA</u> | | | |
| 6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island | | | |
| HUMAN SERVICES TO YOUTH AND FAMILIES | | | |
| 7. Names and Addresses of the Officers and Directors: | | | |
| All officers and directors must be listed. | | | |
| Title | Individual Name | Address | |
| CEO | First, Middle, Last, Suffix | Address, City or Town, State, Zip Co | |
| | | 2007 N THIRD STRE HARRISBURG, PA 17102 U | |
| CFO | RICHARD L STOTTLEMYER II | 2007 NORTH THIRD HARRISBURG, PA 17102 U | |
| | | | |
| 8. REGISTERED AGENT IN RHO Changes Require Filing of F | | | |
| Shanges Require I ming OFF | ····· ···· ··························· | . • | |

CT CORPORATION SYSTEM 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST PROVIDENCE, RI 02914

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

Signed this 14 Day of May, 2016 at 4:31:44 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 <u>KELLY LETTMANN</u> Signature of Authorized Person

Form No. 631 Revised 09/07

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