



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

Fee: \$20.00

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

**Non-Profit Corporation
Annual Report**

Filing Period: June 1 - June 30

In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2016

1. Corporate ID No. 000026137

2. Name of Corporation ALLIANCE FOR BETTER LONG TERM CARE, INC.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 422 POST ROAD, SUITE 204

City or Town: WARWICK

State: RI Zip: 02888 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

IMPROVING THE QUALITY AND ACCESSIBILITY OF LONG-TERM CARE SERVICES FOR ELDERLY RHODE ISLANDERS.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	BRIAN PONTOLILO	1238 DRIFT ROAD WESTPORT , MA 02790 USA
TREASURER	LEON SAMUELIAN	29 LANTERN LANE WARWICK , RI 02886 USA

SECRETARY	THOMAS A. AGUIAR	9 JENKS STREET EAST PROVIDENCE, RI 02914 USA
DIRECTOR	ANDREW S. ROSENZWEIG	17 ADELPHI AVE. PROVIDENCE, RI 02906 USA
VICE PRESIDENT	M PAULA MORRIS	19 ALGER AVENUE E. GREENWICH, RI 02818 USA
DIRECTOR	JOHN HARPOOTIAN	1000 CHAPEL VIEW BLVD. CRANSTON, RI 02920 USA
DIRECTOR	PAULA MORRIS	19 ALGER AVENUE E. GREENWICH, RI 02818 USA
DIRECTOR	RITA MARTIN	254 PEARCE ROAD SWANSEA, MA 02777 USA
DIRECTOR	GARY REIS	19 MENDON AVENUE PAWTUCKET, RI 02861 USA
DIRECTOR	PAMELA BIBEALT	6 JENNIFER LANE NORTH SMITHFIELD, RI 02896 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**

JOANN LEONARD 422 POST ROAD, SUITE 204 WARWICK , RI 02888

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

Signed this 21 Day of May, 2016 at 9:34:08 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 § 7-6.

By JOANN LEONARD
Signature of Authorized Person

Form No. 631
Revised 09/07

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