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. 000061551

2. Name of Corporation Community Vocational Services Incorporated

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 101 AIRPORT ROAD
City or Town: WESTERLY State: RI Zip: 02891 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

TO REPRESENT AND PROVIDE SERVICES AND SUPPORTS TO PERSONS WITH DEVELOPMENTAL DISABILITIES & THEIR FAMILIES.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	JESSICA CORNEAU	162 COLLINS ROAD ASHAWAY, RI 02804- USA
VICE PRESIDENT	SARAH VANN	24 JOY LANE UNCASVILLE, CT 06382 USA

DIRECTOR	BARBARA WRIGHT	11 ROUND HILL ROAD WESTERLY, RI 02891 USA
DIRECTOR	MELISSA LINICUS	16 THOMPSON STREET PAWCATUCK, CT 06379 USA
DIRECTOR	KATHERINE WILHELM	337 COLONEL LEDYARD HWY LEDYARD, CT 06339 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

ROBERT A. MASTROFINO 93 AIRPORT ROAD WESTERLY , RI 02891

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 June, 2016 at 1:15:46 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 JESSICA CORNEAU
Signature of Authorized Person

Form No. 631
Revised 09/07

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