

## 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. 000029280

2. Name of Corporation Rhode Island Association of Orthodontists

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: <u>25 S COUNTY COMMONS WAY</u>

City or Town: WAKEFIELD State: RI Zip: 02879 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

REPRESENTS R.I. ORTHODONTISTS FOR COMMON INTERESTS AND EDUCATIONAL EXCELLENCE.

## 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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
DIRECTOR	MICHAEL FERRY	599 PONTIAC AVE CRANSTON, RI 02910 USA
DIRECTOR	DAN EAVES	500 TOLL GATE RD WARWICK, RI 02886 USA

П	DIRECTOR	GREG PEZZA	1220 PONTIAC AVE.	
П			CRANSTON, RI 02920 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

ADLER POLLOCK & SHEEHAN P.C. ONE CITIZENS PLAZA, 8TH FLOOR PROVIDENCE, RI 02903

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

**Signed this 20 Day of June, 2016 at 11:01:53 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 MICHAEL FERRY
Signature of Authorized Person

Form No. 631 Revised 09/07

© 2007 - 2016 State of Rhode Island and Providence Plantations All Rights Reserved