

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. 000487904

2. Name of Corporation Doulas of Rhode Island/DORI

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 8 PENSTON AVENUE

City or Town: WESTERLY State: RI Zip: 02891 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 42 BEVERLY CIRCLE

City or Town: GREENVILLE State: RI Zip: 02828 Country: UNI

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

SUPPORT OF PHYSICAL AND EMOTIONAL BENEFITS DURING AND AFTER BIRTH

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
PRESIDENT	MEGAN BAIN	8 PENSTON AVENUE WESTERLY, RI 02891 USA
PRESIDENT	JENNAH HUBBELL	42 BEVERLY CIRCLE GREENVILLE, RI 02828 USA
SECRETARY	KIM MCNEICE	249B STONY FORT

		WEST KINGSTON , RI 02892 USA
DIRECTOR	MEGAN BAIN	8 PENTON AVE
		WESTERLY, RI 02891 USA
DIRECTOR	JENNAH HUBBELL	42 BEVERLY CIRCLE
		GREENVILLE, RI 02828 USA
DIRECTOR	KIM MCNIECE	249B STONY FORT
		WEST KINGSTON, RI 02892 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

MEGAN BAIN 8 PENSTON AVENUE 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 16 Day of September, 2016 at 10:35:22 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 JENNAH HUBBELL

Signature of Authorized Person

Form No. 631 Revised 09/07

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