

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 201

Filing Period: January 1 - March 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 · FAILURE TO FILE THIS REPORT BY MARCH 31 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 15926	1	2. Exact name of the Corporation Kenneth J. Hathaway, D.O., Inc					
3. Principal office address 360 Kingstown Road 4. Business Phone No. 401 783-3334			City Narragansett	· · · · · <u>-</u>	State RI	Zip 02882	
			5. State of Incorporation Rhode Island				
6. Brief description of the cl Practice of Osteopa							
	villese vischilde	Ressivê Johannes					
President Name Kenneth J. Hathaway			Vice-President Name Kenneth J. Hathaway				
Street Address 360 Kingstown Road			Street Address 360 Kingstown Road				
City Narragansett	State RI	Zip 02882	City Narragansett		State RI	Zip 02882	
Secretary Name Kenneth J. Hathaway			Treasurer Name Kenneth J. Hathaway				
Street Address 360 Kingstown Road			Street Address 360 Kingstown Road				
City Narragansett	State RI	Zip 02882	City Narragansett		State RI	Zip 02882	
Director Name Kenneth J. Hathawa	ıy		Director Name				
Street Address 360 Kingstown Roa	d		Street Address				
City Narragansett	State RI	Zip 02882	City		State	Zip	
Director Name			Director Name				
Street Address			Street Address				
City	State	Zip	City		State	Zip	
ASTRACENCE DE LA		1 Section of the Sect	gerig et sakkones			MENT)	
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			NUMBER OF SHARES	CLASS/SERIES PAR VALUE			
			600	С	ommon	no par value	
see Section 9 of Instruction	on si lee t.						
This report must be execut			ized representative. If the coff the corporation by the re			of a receiver or trustee,	

TLU LIL

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Authorized Representative

7/13/2017

Kenneth J. Hathaway

Print or Type Name of Authorized Representative

Form No. 630 Revised: 01/2012