



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

Fee: \$50.00

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

**Foreign Business Corporation  
Annual Report**

Filing Period: January 1 - March 1

*In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501 (c&d)) is subject to a penalty fee of \$25.00.*

**ANNUAL REPORT YEAR:** 2017

**1. Corporate ID No.** 000506325

**2. Name of Corporation** General Healthcare Resources, Inc.

**3. Street Address Principal Business Office:**

No. and Street: 2250 HICKORY ROAD, SUITE 240

City or Town: PLYMOUTH MEETING

State: PA Zip: 19462 Country: USA

**4. Business Phone No.**

610-834-1122

**5. State of Incorporation**

State: PA

**ARTICLE III**

Using the following NAICS codes, please select the code that best describes your business.

NAICS Code

6

561310

**6. Brief Description of the Character of Business Conducted in Rhode Island**

HEALTHCARE STAFFING OF THERAPISTS ON A PART-TIME AND PER DIEM BASIS

**7. Names and Addresses of the Officers and Directors:**

**All officers and directors must be listed.**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	ANTHONY ROSSI	2250 HICKORY RD, STE 240 PLYMOUTH MEETING, PA 19462 USA
TREASURER	LAWRENCE A PALMER	404 E LANCASTER AVE WAYNE, PA 19087 USA

SECRETARY	LAWRENCE A PALMER	404 E LANCASTER AVE WAYNE, PA 19087 USA
CEO	JOHN J QUIRK	2250 HICKORY RD, STE 240 PLYMOUTH MEETING, PA 19462 USA
CFO	JEFFREY W CRATER	2250 HICKORY RD, STE 240 PLYMOUTH MEETING, PA 19462 USA
DIRECTOR	LAWRENCE J KENT	404 E LANCASTER AVE WAYNE, PA 19087 USA
DIRECTOR	MAURICE D KENT	404 E LANCASTER AVE WAYNE, PA 19087 USA

### 8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CNP		\$0.0000	2,000,000.00	1280944

**9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.**

**Signed this 23 Day of March, 2017 at 3:55:24 PM.** *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 corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By JEFFREY W CRATER  
Signature of Authorized Representative of the Corporation

Form No. 630  
Revised 09/07

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