State of Rhode Island and Providence Plantations Fee: \$20.00 Office of the Secretary of State			
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: 2017			
1. Corporate ID No. 000029988			
2. Name of Corporation Frank Olean Center, Inc.			
3. State of Incorporation			
State: <u>RI</u>			
Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification <u>click here.</u>			
NAICS Code 6			
<u>624120</u>			
4. Corporate Address in Rhode Island			
No. and Street: <u>93 AIRPORT ROAD</u>			
City or Town:WESTERLYState: RIZip:02891Country: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 PROMOTE GENERAL WELFARE AND PROVIDE SERVICE TO THE MENTALLY AND			
PHYSICALLY DISABLED			
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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete			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	JOAN GRADILONE	7 WILDFLOWER DR WESTERLY, RI 02891 USA
TREASURER	DAVE KMETZ	15 DANIELLE AVE WESTERLY, RI 02891 USA
VICE PRESIDENT	RICK HARLEY	5 DON ROSS ROAD WESTERLY, RI 02891 USA
DIRECTOR	PETER DEL GIUDICE	62 FRANKLIN ST-115 WESTERLY, RI 02891 USA
DIRECTOR	EVIE MARTIN	4 WHITE ST WESTERLY, RI 02891 USA
DIRECTOR	JOANNA VALENTINI	6 BRASS RING RD WESTERLY, RI 02891 USA
DIRECTOR	ANNE WOOD DR.	PO BOX 38 CHARLESTOWN, RI 02813 USA
DIRECTOR	WILLIAM NARDONE	38 WICKLOW ROAD WESTERLY, RI 02891 USA
DIRECTOR	PAUL YUROF	20 CEDARWOOD DRIVE HOPE VALLEY, RI 02832 USA
DIRECTOR	BETHANY LYONS	11 STONY HILL DRIVE MYSTIC, CT 06355 USA
DIRECTOR	CHERYL LANCE	12 CLAY STREET WESTERLY, RI 02891 USA
DIRECTOR	JOHN LANTERMAN	6 RIIDAM WAY CHARLESTOWN, RI 02813 USA
DIRECTOR	JOHN NICOLOSI	160 CLEARVIEW ROAD CHARLESTOWN, RI 02813 USA
DIRECTOR	PETER MANERI	17 EAST FAIRWAY AVENUE WESTERLY, RI 02804 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 RIARC, INC. 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 30 Day of June, 2017 at 1:18:46 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 <u>ROBERT A MASTROFINO, CPA</u> Signature of Authorized Person

Form No. 631

Revised 09/07

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