



Department of State - Business Services Division

Annual Report for the year: **2018**

Limited Liability Company

- Filing period: September 1 - November 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entry ID Number 793701		2. Exact name of the Limited Liability Company Center for Integrated Psychotherapy, LLC			
3. NAICS Code 621330		4. Brief description of the character of business conducted in Rhode Island Operation of a Psychotherapy practice providing mental health counseling to patients.			
5. State of Formation Rhode Island					
6. Principal Office Address 1130 Ten Rod Road, Suite D-307A		City North Kingstown		State RI	Zip 02852
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Laurie Rackley-Joseph, LICSW			Contact Title Member/Psychotherapist		
Street Address 1130 Ten Rod Road, Suite D-307A		City North Kingstown		State RI	Zip 02852
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
9 Resident Agent in Rhode Island This information is currently of record with the Department of State. Changes require filing Form 642.					
<i>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.</i>					
Name of Authorized Person Laurie Rackley-Joseph				Date 08-18-2018	
Signature of Authorized Person <div style="text-align: center;">SIGN DOCUMENT HERE</div>					

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

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AUG 30 2018

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