



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: June 1 - June 30 • Filing Fee: \$20.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 82922		2. Name of Corporation CHADD, Inc. (CHILDREN & ADULTS WITH ATTENTION-DEFICIT/HYPERACTIVITY DISORDER)	
3. State of Incorporation FLORIDA		4. Corporate address in Rhode Island -Street Address 222 JEFFERSON BLVD SUITE 200	
5. Foreign corporation: Enter principal office address 8181 Professional Place, Ste. 150		City Landover	Zip 20785

6. Brief Description of the character of the affairs which are actually conducted in Rhode Island
HUMAN HEALTH AND WELFARE ORGANIZATION.

7. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Mary Durham		Vice President Name None	
Street Address 101 West Iris		Street Address .	
City McAllen	State TX	Zip 78501	
Secretary Name Soleil Gregg		Treasurer Name Paula Stewart	
Street Address 3600 Benedict Rd.		Street Address 7158 Brooks Rd.	
City Hurricane	State WV	Zip 25526	City Maple City

8. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23

Director Name Jose J. Bauermeister, Ph.D.		Director Name Milton F. Beltran	
Street Address Univ. of PR, 177 Las Caobas		Street Address Urb. Monticielo, G-7 4 St.	
City San Juan	State PR	Zip 00927-4230	City Caguas
Director Name Chris A. Zeigler Dendy		Director Name Dina Dudarevitch	
Street Address P.O. Box 189		Street Address 34 Beane Lane	
City Cedar Bluff	State AL	Zip 35959	City Newington

9. REGISTERED AGENT IN RHODE ISLAND -DO NOT ALTER- Changes require filing of Form 641 -R.I.G.L. 7-6-13 / 7-6-78

Agent Name National Registered Agents, Inc.		Address	
Address 222 Jefferson Blvd., Ste. 200		City Warwick	Zip 02888

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



8 2 9 2 2

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.

Mary M Durham May 25, 2005
Signature of Officer Date
MARY DURHEIM
Print or Type Name of Officer
PRESIDENT
Title of Officer

82922 FNP 05/20/05 12:08:01 PM
File Date 5-31-05
Check No. 3476
By: DW
FOR SECRETARY OF STATE USE ONLY



CHADD National Board of Directors 2004-2005

Mary Durheim

President

June 2006

PO Box 3700

McAllen, TX 78502

Home Phone: 956-687-5978

Home Fax: N/A

Voice Mail: 956-227-5326

Business Phone: 956-618-3003

Business Fax: 956-687-5654

E-Mail: ericc504@yahoo.com

Phyllis Anne Teeter Ellison, Ed.D.

President-Elect

June 2005

4200 Hartford Ave.

Enderis Hall

University of Wisconsin-Milwaukee

Milwaukee, WI 53201

Home Phone: 414-228-8408

Home Fax: N/A

Business Phone: 414-229-4998

Business Fax: 414-229-4939

E-Mail: TEETER@uwm.edu

Soleil Gregg, MA

Secretary

June 2006

PO Box 107

Hurricane, WV 25526

Home Phone: 304-562-3507

Home Fax: 304-562-4172

E-Mail: soleilgregg@verizon.net

Paula Stewart, R.N.

Treasurer

June 2006

1907 Harbour Circle

Cape Coral, FL 33914

Home Phone: 239-945-0446

Home Fax: 239-945-0114

E-Mail: paobstew@aol.com

Summer Contact Information: (7-04 to 10-04)

7158 Brooks Road

Maple City, MI 49664

Home Phone: 231-334-3176

E-Mail: paobstew@aol.com

José J. Bauermeister, Ph.D.

June 2006

University of Puerto Rico

177 Las Caobas

San Juan, PR 00927-4230

Business Phone: 787-763-1946

Business Fax: 787-758-4561

E-Mail: jjbauer@prtc.net

Milton F. Beltrán

June 2006

Urb. Monticielo

G-7 4 St.

Caguas, PR 00725

Mailing Address:

PMB 304

200 Rafael Cordero Avenue, Suite 140

Caguas, PR 00725-3757

Home Phone: 787-743-7937

Home Fax: N/A

Business Phone: 787-750-3300

Business Fax: 787-762-1693

Mobile: 787-640-6776

E-Mail: MBeltran@Helvetia-pr.com

Chris A. Zeigler Dendy

June 2005

P.O Box 189

Cedar Bluff, AL 35959

Home Phone: 256-779-2252

Home Fax: 256-779-5203

Business Phone: 256-779-2252

Business Fax: 256-779-5203

E-Mail: chris@chrisdendy.com

Dina Dudarevitch

June 2005

34 Beane Lane

Newington, NH 03801

Home Phone: 603-436-3469

Home Fax: N/A

Business Phone: 603-431-6703, Ext. 3152

Business Fax: 603-431-0215

E-Mail: dmdina@aol.com



Peter S. Jensen, M.D.

June 2005

Center for the Advancement of Children's Mental Health

Department of Child Psychiatry
Columbia University/NY State Psychiatric Institute

1051 Riverside Drive, Unit 78
New York, NY 10032

Home Phone: N/A

Home Fax: N/A

Business Phone: 212-543-5334

Business Fax: 212-543-5260

E-Mail: pj131@columbia.edu

Harvey Parker, Ph.D.

Lifetime member

300 NW 70th Avenue
Suite 102

Plantation, FL 33317

Home Phone: 954-384-4930

Home Fax: N/A

Business Phone: 954-792-8100

Business Fax: 954-792-8545

E-Mail: hparker@addwarehouse.com

Karran Harper Royal

June 2006

7611 Branch Drive
New Orleans, LA 70128

Home Phone: 504-245-2419

Home Fax: 504-241-8372

Business Phone: 504-827-0610

Business Fax: 504-827-2999

E-Mail: karranroyal@msn.com or:
chaddnola@msn.com

Adele Sebben

June 2006

5612 Rathbone Place
Springfield, VA 22151

Home Phone: 703-321-7376

Home Fax: 703-321-3141

E-Mail: asebben@cox.net

Joan K. Teach

June 2005

1814 Villiage Mill Rd
Dunwoody, GA 30338

Home Phone: 770-396-5851

Home Fax: 770-396-5051 (call first)

Mobile Phone: 404-502-7921

Business Fax: 404-377-0879

E-Mail: joanteach@mindspring.com

or: rdteach@mindspring.com

Non-Voting Members:

Carl Smith, Ph.D., PAB Chair

2120 Sylvan Rill Road

West Des Moines, IA 50265

Home Phone: 515-285-6267

Home Fax: 515-287-7726

Cell: 515-229-9767

E-mail: csmith@iastate.edu

Elliott Portnoy, Legal Counsel

Sonnenschein Nath & Rosenthal

1301 K Street, NW

Suite 600, East Tower

Washington, D.C. 20005

Business Phone: 202-408-6433

Business Fax: 202-408-6399

E-Mail: eportnoy@sonnenschein.com

E. Clarke Ross, D.P.A., CEO

CHADD, Chief Executive Officer.

8181 Professional Place

Suite 150

Landover, MD 20785

Business Phone: 301-306-7070 Ext. 111

Business Fax: 301-306-7090

E-Mail: clarke_ross@chadd.org



NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: June 1 - June 30 • Filing Fee: \$20.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 82922		2. Name of Corporation CHADD, INC. (CHILDREN & ADULTS WITH ATTENTION-DEFICIT/HYPERACTIVITY DISORDER)			
3. State of Incorporation FLORIDA		4. Corporate address in Rhode Island - Street Address 222 JEFFERSON BLVD, STE. 200		City WARWICK	Zip 02888
5. Foreign corporation: Enter principal office address 8191 PROFESSIONAL PL., STE. 150			City LANDOVER	State MD	Zip 20785
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island HUMAN HEALTH & WELFARE ORGANIZATION					
7. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name MARY DURHEIM			Vice President Name NONE		
Street Address 101 WEST IRIS			Street Address		
City McALLEN	State TX	Zip 78501	City	State	Zip
Secretary Name PHYLLIS ANNE TEETER ELLISON			Treasurer Name CHRIS A. ZEIGLER DENDY		
Street Address 4200 HARTFORD AVE UNIV. OF WISC.-MILWAUKEE			Street Address 650 COUNTY RD. 650		
City MILWAUKEE	State WI	Zip 53201	City CEDAR BLUFF	State AL	Zip 35959
8. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23					
Director Name SOBEIL GREGG			Director Name JOSÉ J. BAUERMEISTER		
Street Address 3600 BENEDICT RD.			Street Address LAS CAOBAS #177		
City HURRICANE	State WV	Zip 25526	City SAN JUAN	State PR	Zip 00927
Director Name ANDREW ADESMAN			Director Name MILTON F. BELTRÁN		
Street Address 120 GEORGIAN CT.			Street Address URB. ARBOLADA D-14 YAGRUMO ST.		
City EAST HILLS	State NY	Zip 11576	City CAGUS	State PR	Zip 00727-1302
9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78					
Agent Name NATIONAL REGISTERED AGENTS, INC.			Address		
Address 222 JEFFERSON BLVD, STE. 200			City WARWICK	Zip 02888	

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

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.

Mary M Durheim 5-23-04
Signature of Officer Date

MARY DURHEIM
Print or Type Name of Officer

PRESIDENT
Title of Officer

REC 51000

File Date **MAY 26 2005**

Check No. **BY [Signature]**

By: _____

FOR SECRETARY OF STATE USE ONLY



CHADD National Board of Directors 2003-2004

Mary Durheim

President

June 2006

PO Box 3700

McAllen, TX 78502

Home Phone: 956-687-5978

Home Fax: N/A

Voice Mail: 956-227-6918

Business Phone: 956-618-3003

Business Fax: 956-687-5654

E-Mail: ericmod@hiline.net

Evelyn Polk Green, MS.Ed.

Immediate Past President

June 2004

11453 South Vincennes Avenue

Chicago, IL 60643

Home Phone: 773-779-7751

Home Fax: 773-779-0677

Business Phone: 773-535-3245

Business Fax: 773-535-3643

E-Mail: egreen@enc.k12.il.us

Phyllis Anne Teeter Ellison, M.Ed.

Secretary

June 2005

4200 Hartford Ave.

Enderis Hall

University of Wisconsin-Milwaukee

Milwaukee, WI 53201

Home Phone: 414-228-8408

Home Fax: N/A

Business Phone: 414-229-4998

Business Fax: 414-229-4939

E-Mail: TEETER@uwm.edu

Chris A. Zeigler Dendy

Treasurer

June 2004

P.O Box 189

Cedar Bluff, AL 35959

Home Phone: 256-779-2252

Home Fax: 256-779-5203

Business Phone: 256-779-2252

Business Fax: 256-779-5203

E-Mail: chris@chrisdendy.com

Soleil Gregg, MA

Member-at-Large

June 2006

PO Box 107

Hurricane, WV 25526

Home Phone: 304-562-3507

Home Fax: 304-562-4172

E-Mail: solcilgregg@earth1.net

Andrew Adesman, M.D.

June 2004

120 Georgian Ct.

East Hills, NY 11576

Home Phone: 516-629-1000

Home Fax:

Business Phone: 718-470-3155

Business Fax: 718-343-3578

E-Mail: adesman@LIJ.edu

José J. Bauermeister, Ph.D.

June 2006

Las Caobas #177

San Juan, PR 00927

Business Phone: 787-763-1946

Business Fax: 787-758-4561

E-Mail: jbauer@isla.net

Milton F. Beltrán

June 2006

Urb. Arbolada

D-14 Yagrumo St.

Caguas, PR 00727-1302

Home Phone: 787-743-7937

Home Fax: 787-762-1693

E-Mail: Beltransalva@CentennialPR.net

Janice Bond

June 2004

3117 Olde Towne Lane

Chattanooga, TN 37415

Home Phone: 423-876-9077

Home Fax: 423-876-9078

Business Phone: N/A

Business Fax: N/A

E-Mail: Gbond54604@aol.com



Dina Dudarevitch

June 2005
34 Beane Lane
Newington, NH 03801
Home Phone: 603-436-3469
Home Fax: N/A
Business Phone: 603-431-6703, Ext. 3152
Business Fax: 603-431-0215
E-Mail: dinad@smhc.seacoastmentalhealth.org

Ruth Hughes, Ph.D.

June 2004
IAPSRs
601 N. Hammonds Ferry Rd., #A
Linthicum, MD 21090
Home Phone: N/A
Home Fax: N/A
Business Phone: 410-789-7054
Business Fax: 410-789-7675
Email: ruthhughes@comcast.net
OR: ruthhughes@iaprs.org

Peter S. Jensen, M.D.

June 2005
Center for the Advancement of Children's Mental Health
Department of Child Psychiatry
Columbia University/NY State Psychiatric Institute
1051 Riverside Drive, Unit 78
New York, NY 10032
Home Phone: N/A
Home Fax: N/A
Business Phone: 212-543-5334
Business Fax: 212-543-5260
E-Mail: pj131@columbia.edu

Harvey Parker, Ph.D.

Lifetime member
300 NW 70th Avenue
Suite 102
Plantation, FL 33317
Home Phone: 954-384-4930
Home Fax: N/A
Business Phone: 954-792-8100
Business Fax: 954-792-8545
E-Mail: hparker@addwarehouse.com

Karran Harper Royal

June 2006
7611 Branch Drive
New Orleans, LA 70128
Home Phone: 504-245-2419
Home Fax: 504-241-8372
Business Phone: 504-826-0610
Business Fax: 504-827-2999
E-Mail: karranroyal@msn.com

Adele Sebben

June 2006
5612 Rathbone Place
Springfield, VA 22151
Home Phone: 703-321-7376
Home Fax: 703-321-3141
E-Mail: jsebben@prodigy.net

Paula Stewart, R.N.

June 2006
1907 Harbour Circle
Cape Coral, FL 33914
Home Phone: 239-945-0446
Home Fax: 239-945-0114
E-Mail: paobstew@aol.com
Summer Contact Information: (7-03 to 10-03)
7158 Brooks Road
Maple City, MI 49664
Home Phone: 231-334-3176
E-Mail: paobstew@aol.com

Joan K. Teach

June 2005
1814 Villiage Mill Rd
Dunwoody, GA 30338
Home Phone: 770-396-5851
Home Fax: 770-396-5051 (call first)
Mobile Phone: 404-502-7921
Business Fax: 404-377-0879
E-Mail: joanteach@mindspring.com
rdteach@mindspring.com



Cheri M. Villines

June 2005

DeKalb Community Service Board

445 Winn Way, Suite 477

Kennesaw, GA 30156

Home Phone: N/A

Home Fax: N/A

Business Phone: 404-508-7897

Business Fax: 404-508-7795

Email: cheriv@dekcsb.org

Non-Voting Members:

Carl Smith, Ph.D., PAB Chair

Resource Center for Issues in Special Education

Drake University

2507 University Avenue

Des Moines, IA 50311

Business phone: 515-271-3936

Business fax: 515-271-4185

E-mail: carl.smith@drake.edu

Elliott Portnoy, Legal Counsel

Sonnenschein Nath & Rosenthal

1301 K Street, NW

Suite 600, East Tower

Washington, D.C. 20005

Business Phone: 202-408-6433

Business Fax: 202-408-6399

E-Mail: eportnoy@sonnenschein.com

E. Clarke Ross, D.P.A., CEO

CHADD, Chief Executive Officer.

8181 Professional Place

Suite 150

Landover, MD 20785

Business Phone: 301-306-7070 Ext. 111

Business Fax: 301-306-7090

E-Mail: clarke_ross@chadd.org



NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

Filing Period: June 1 - June 30 • Filing Fee: \$20.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 82922
 2. Name of Corporation C.H.A.D.D. Inc. (Children and Adults with Attention Deficit Disorders)
 3. State of Incorporation FLORIDA
 4. Corporate address in Rhode Island - Street Address PO Box 8251
 City Cranston Zip 02920
 State RI
 5. Foreign corporation. Enter principal office address
 City
 State Zip
 6. Brief Description of the character of the affairs which are actually conducted in Rhode Island.
HUMAN HEALTH AND WELFARE ORGANIZATION.

7. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Frances Riessen
 Vice President Name Lynette Lopes
 Street Address 155 Beechwood Dr. Street Address 135 Abbott St.
 City Cranston State RI Zip 02921 City Providence State RI Zip 02906
 Secretary Name Angela Silverman
 Treasurer Name Lori Marrapese
 Street Address 51 Debbie Dri Street Address 43 Cottonwood Dr.
 City Cranston State RI Zip 02921 City Cranston State RI Zip 02921

8. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN THE SPACES BEFORE USING ATTACHMENTS
 THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23

Director Name Frances Riessen
 Director Name Lynette Lopes
 Street Address 155 Beechwood Dr. Street Address 135 Abbott St.
 City Cranston State RI Zip 02921 City Providence State RI Zip 02906
 Director Name Lori Marrapese
 Director Name
 Street Address 43 Cottonwood Dr. Street Address
 City Cranston State RI Zip 02921 City State Zip

9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filling of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

Agent Name FRANCES RIESSEN
 Address 155 BEECHWOOD DRIVE
 City CRANSTON Zip 02921

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



FILED
 File Date JUN 26 2003
 Check No. 3v 1416 GAA
 By
 FOR SECRETARY OF STATE USE ONLY

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 Officer Lori Marrapese Date 6/26/03
 Print or Type Name of Officer Lori Marrapese
 Title of Officer Treasurer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3640

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 02

Filing Period: June 1 - June 30 • Filing Fee: \$20.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 82922 2. Name of Corporation CHADD INC
 3. State of Incorporation Rhode Island 4. Corporate address in Rhode Island - Street Address P.O. Box 8251 City Cranston Zip 02920
 5. Foreign corporation: Enter principal office address CHADD National 8181 Professional Place Suite 204 City Landover State MD Zip 20785

6. Brief Description of the character of the affairs which are actually conducted in Rhode Island
Human Health and Welfare Organization

7. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name <u>Frances Riessen</u> Street Address <u>155 Beechwood Dr.</u> City <u>Cranston</u> State <u>RI</u> Zip <u>02921</u>	Vice President Name <u>Lynette Lopes</u> Street Address <u>135 Abbott St.</u> City <u>Providence</u> State <u>RI</u> Zip <u>02906</u>
Secretary Name <u>Angie Silverman</u> Street Address <u>54 Debbie Dr.</u> City <u>Cranston</u> State <u>RI</u> Zip <u>02921</u>	Treasurer Name <u>Lori Marrapese</u> Street Address <u>43 Cottonwood Dr.</u> City <u>Cranston</u> State <u>RI</u> Zip <u>02921</u>

8. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23

Director Name Street Address City State Zip	Director Name Street Address City State Zip
Director Name Street Address City State Zip	Director Name Street Address City State Zip

9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

Agent Name Frances Riessen Address 155 Beechwood Dr.
 City Cranston State RI Zip 02921

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

FILED

APR 29 2003

By KMC
318012

File Date _____
 Check No _____
 \$ _____
 FOR SECRETARY OF STATE USE ONLY

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.

Lynette M. Lopes 4/29/03
 Signature of Officer Date
Lynette M. Lopes
 Print or Type Name of Officer
Vice President
 Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 01

Filing Period: June 1 - June 30 • Filing Fee: \$20.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. <u>82922</u>		2. Name of Corporation <u>CHADD INC</u>	
3. State of Incorporation <u>Rhode Island</u>		4. Corporate address in Rhode Island - Street Address <u>P.O. Box 8251</u>	
5. Foreign corporation: Enter principal office address <u>CHADD National 8181 Professional Place</u>		City <u>Landover</u>	
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island <u>Human Health and Welfare Organization</u>		State <u>MD</u>	
7. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS		Zip <u>20785</u>	
President Name <u>Jeanne Connery</u>		Vice President Name <u>Lori Marrapese</u>	
Street Address <u>284 Grandview Drive</u>		Street Address <u>43 Cottonwood Dr.</u>	
City <u>Warwick</u>		City <u>Cranston</u>	
State <u>RI</u>		State <u>RI</u>	
Zip <u>02886</u>		Zip <u>02921</u>	
Secretary Name		Treasurer Name <u>as above</u>	
Street Address		Street Address	
City		City	
State		State	
Zip		Zip	
8. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3) R.I.G.L. 7-6-23			
Director Name		Director Name	
Street Address		Street Address	
City		City	
State		State	
Zip		Zip	
Director Name		Director Name	
Street Address		Street Address	
City		City	
State		State	
Zip		Zip	
9. REGISTERED AGENT IN RHODE ISLAND DO NOT ALTER: Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-78			
Agent Name <u>Frances Riessen</u>		Address <u>155 Beechwood Dr.</u>	
Address		City <u>Cranston</u>	
		State <u>RI</u>	
		Zip <u>02921</u>	

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

FILED

APR 29 2003

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.

Lori Marrapese 4/2/03
Signature of Officer Date
Lori Marrapese
Print or Type Name of Officer
Treasurer
Title of Officer

File Date 4/2/03
Check No. 318012
By: _____
FOR SECRETARY OF STATE USE ONLY



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 00

Filing Period: June 1 - June 30 • Filing Fee: \$20.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 82922		2. Name of Corporation CHADD INC			
3. State of Incorporation Rhode Island		4. Corporate address in Rhode Island - Street Address P.O. Box 8251		City Cranston	Zip 02920
5. Foreign corporation: Enter principal office address CHADD National 8181 Professional Place Suite 201 Landover MD 20785					
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island Human Health and Welfare Organization					
7. NAMES AND ADDRESSES OF THE OFFICERS (X) BOX FOR ATTACHMENT () FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Jeanne Connery			Vice President Name Lori Marrapese		
Street Address 384 Grandview Drive			Street Address 43 Cottonwood Dr.		
City Warwick	State RI	Zip 02886	City Cranston	State RI	Zip 02921
Secretary Name			Treasurer Name as above		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. NAMES AND ADDRESSES OF THE DIRECTORS (X) BOX FOR ATTACHMENT () FILL IN SPACES BEFORE USING ATTACHMENTS THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3) R.I.G.L. 7-6-23					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. REGISTERED AGENT IN RHODE ISLAND DO NOT ALTER Changes require filing of Form 641 R.I.G.L. 7-6-13/7-6-78					
Agent Name Frances Riessen			Address 155 Beechwood Dr.		
Address			City Cranston	State	Zip 02921

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

FILED

APR 21 2003

File Date APR 21 2003
 Check No. 51802
 By: KMC
 FOR SECRETARY OF STATE USE ONLY

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.

Lori Marrapese 4/2/03
 Signature of Officer Date
Lori Marrapese
 Print or Type Name of Officer
Treasurer
 Title of Officer



NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 99

Filing Period: June 1 - June 30 • Filing Fee: \$20.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. <u>82922</u>		2. Name of Corporation <u>CHADD INC</u>	
3. State of Incorporation <u>Rhode Island</u>		4. Corporate address in Rhode Island - Street Address <u>P.O. Box 3251</u>	
5. Foreign corporation: Enter principal office address <u>CHADD National 8181 Professional Place</u>		City <u>Cranston</u> Zip <u>02920</u>	
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island <u>Human Health and Welfare Organization</u>		State <u>MD</u> Zip <u>20785</u>	
7. NAMES AND ADDRESSES OF THE OFFICERS (X BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name <u>Jeanne Connerly</u>		Vice President Name <u>Lori Marrapese</u>	
Street Address <u>284 Grandview Drive</u>		Street Address <u>43 Cottonwood Dr</u>	
City <u>Warwick</u> State <u>RI</u> Zip <u>02886</u>		City <u>Cranston</u> State <u>RI</u> Zip <u>02921</u>	
Secretary Name		Treasurer Name <u>as above</u>	
Street Address		Street Address	
City		City	
State		State	
Zip		Zip	
8. NAMES AND ADDRESSES OF THE DIRECTORS (X BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3) R.I.G.L. 7-6-23			
Director Name		Director Name	
Street Address		Street Address	
City		City	
State		State	
Zip		Zip	
Director Name		Director Name	
Street Address		Street Address	
City		City	
State		State	
Zip		Zip	
9. REGISTERED AGENT IN RHODE ISLAND. DO NOT ALTER. Changes require filing of Form 641-R.I.G.L. 7-6-13/7-6-78			
Agent Name <u>Frances Riessen</u>		Address <u>155 Beechwood Dr</u>	
Address		City <u>Cranston</u> Zip <u>02921</u>	

SECRETARY OF STATE
CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RI 02903-1335
401.222.3040

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

FILED

APR 29 2003

By KMC
3/8/02

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.

Lori Marrapese 4/2/03
Signature of Officer Date
Lori Marrapese
Print or Type Name of Officer
Treasurer
Title of Officer

File Date _____
Check No. _____
By: _____
FOR SECRETARY OF STATE USE ONLY



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 98

Filing Period: June 1 - June 30 • Filing Fee: \$20.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. <u>82922</u>		2. Name of Corporation <u>CHADD INC</u>		3. State of Incorporation <u>Rhode Island</u>		4. Corporate address in Rhode Island - Street Address <u>P.O. Box 8251</u>		City <u>Cranston</u>		Zip <u>02920</u>	
5. Foreign corporation: Enter principal office address <u>CHADD National 881 Professional Place</u>		Suite <u>501</u>		City <u>Lanham</u>		State <u>MD</u>		Zip <u>20785</u>		6. Brief Description of the character of the affairs which are actually conducted in Rhode Island <u>Human Health and Welfare Organization</u>	
7. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS											
President Name <u>Clare Lundberg</u>						Vice President Name					
Street Address <u>89 Eleventh St.</u>						Street Address					
City <u>Providence</u>		State <u>RI</u>		Zip <u>02906</u>		City		State		Zip	
Secretary Name						Treasurer Name					
Street Address						Street Address					
City		State		Zip		City		State		Zip	
8. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23											
Director Name						Director Name					
Street Address						Street Address					
City		State		Zip		City		State		Zip	
Director Name						Director Name					
Street Address						Street Address					
City		State		Zip		City		State		Zip	
9. REGISTERED AGENT IN RHODE ISLAND: DO NOT ALTER. Changes require filing of Form 641 R.I.G.L. 7-6-13/7-6-78											
Agent Name <u>Lorraine Nault</u>						Address <u>Angell Rd</u>					
Address						City <u>Lincoln</u>		State <u>RI</u>		Zip <u>02865</u>	

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

APR 24 2003

By LC MC
318012

File Date _____
Check No. _____
By: _____

FOR SECRETARY OF STATE USE ONLY

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.

Lynette M. Lopes 4/29/03
Signature of Officer Date
Lynette M. Lopes
Print or Type Name of Officer
Vice President
Title of Officer

Filing Fee: \$20.00

To be filed annually during the month of June

State of Rhode Island and Providence Plantations
Corporation Division
100 North Main Street
Providence, RI 02903

NON-PROFIT CORPORATION

Corporate ID Number 0062922 Annual Report for the year 1997

FIRST: The name of the corporation is C.H.A.D.D. Inc. (Children and Adults with Attention Deficit Disorders)

SECOND: It is incorporated under the laws of FLORIDA

THIRD: The character of the affairs which it is actually conducting in Rhode Island, briefly stated, is VOLUNTEERS CONDUCT FREE MEETINGS TO BENEFIT LOCAL MEMBERS

FOURTH: If a foreign corporation, the address of its principal office in the state or country under the laws of which it is incorporated is 499 N.W. 70TH AVE SUITE 101 PLANTATION FLA 33317

FIFTH: Corporate address in Rhode Island LORRAINE NAULT 224 LANGELL RD
LINCOLN RI 02865

SIXTH: Names and addresses of its directors and officers: (In compliance with 7-6-23 of the R.I.G.L. 1956, Reenactment of 1994, the number of Directors of a corporation shall not be less than three (3).)

THIS REPORT WILL NOT BE ACCEPTED UNLESS THREE (3) DIRECTORS ARE LISTED.

NAME	OFFICE	ADDRESS
SEE ATTACHED LIST	Director	
	Director	
	Director	
	President	
	Vice-President	
	Secretary	
	Treasurer	

RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV.
JAN 15 2 57 PM '98

(If additional space is needed, attach rider)
Dated: 5/20 PAID 1997

C.H.A.D.D. INC.
(Name of Corporation)

By [Signature]
Title PRESIDENT

(Report must be signed by an officer)

JAN 20 1998
100
SECY OF STATE

If the corporation has changed its registered office and/or its registered agent, Form N-14 must be filed. Please contact the Corporation Division, 277-3040, for further information.

CH.A.D.D. NATIONAL BOARD OF DIRECTORS
1996-1997

Julie Doy, President ('98)
916 45th Street
West Des Moines, IA 50265
Phone: 515-225-4196
Fax: 515-225-7089
E-mail: julie_doy@chadd.org

Sheila Anderson, President Elect ('99)
17056 159th Place S.E.
Renton, WA 98058
Phone: 206-228-7820
Fax: 206-228-7820
E-mail: sheila_anderson@chadd.org

Mary Robertson, Secretary ('98)
2445 Brookshire Circle
Lexington, KY 40515
Phone: 606-273-7578
Fax: 606-272-6325

Hal Meyer, Treasurer ('97)
215 West 75th Street
New York, NY 10023-1799
Home: 212-724-9699
Work: 212-721-0007
Fax: 212-721-0074
E-mail: hal_meyer@chadd.org

Mary Richard, Immediate Past-President ('97)
1250 Melrose Avenue
Iowa City, IA 52246
Home: 319-358-6844
Work: 319-335-2459
H/F: 319-351-0906
W/F: 319-335-3973
E-mail: mary_richard@chadd.org

Matt Cohen, Esq. ('98)
225 West Washington
Chicago, IL 60606
Phone: 312-419-0252
Fax: 312-419-7428

Pam Cook ('99)
1312 Manor Drive
Upper St. Clair, PA 15241
Home: 412-833-2261
H/F: 412-854-5519
Work: 412-391-3820
Fax: 412-391-3825

JoAnne Evans (11/30/96)
625 Shoreline Court
Eau Claire, WI 54703
CHADD Line: 715-834-9781
Home: 715-834-7770
Fax: 715-834-7782

Michael Finkel M.D. ('99)
7217 South Shore Drive
Altoona, WI 54720
Director Office: 715-838-1912
W/F: 715-838-1954
Home: 715-834-6635
H/F: 715-834-4985

Maureen Gill ('98)
3819 Beech Down Drive
Chantilly, VA 22021
Home: 703-803-0511
Fax: 703-803-6331

David Maiseloff ('99)
30161 Southfield Road, Suite 201
Southfield, MI 48076
Work: 310-540-9233
Fax: 310-540-2560

Harvey Parker, Ph.D. (Lifetime)
300 NW 70th Avenue, #102
Plantation, FL 33317
Phone: 954-792-8100
Fax: 954-792-8545
E-mail: harvey_parker@chadd.org

Marlene Snyder, Ph.D. ('97)
1020 Dorsey Street
Beatrice, NE 68310
Home: 402-228-7249
H/F: 402-228-7249
Work: 402-472-3479
W/F: 402-472-8412
E-mail: marlene_snyder@chadd.org

Sam Goldstein, Ph.D.
Neurology, Learning & Behavior Center
230 South, 500 East, Suite 100
Salt Lake City, UT 84102
Work: 801-532-1484
Fax: 801-532-1486

* Term ends Rev. 10/1/96

Filing Fee: \$20.00

To be filed annually during the month of June

SECRETARY OF STATE

State of Rhode Island and Providence Plantations
Corporation Division
100 North Main Street
Providence, RI 02903

NON-PROFIT CORPORATION

Corporate ID Number 0082822 Annual Report for the year 1996

FIRST: The name of the corporation is C.H.A.D.D. INC. (Children and Adults with Attention Deficit Disorders)

SECOND: It is incorporated under the laws of FLORIDA

THIRD: The character of the affairs which it is actually conducting in Rhode Island, briefly stated, is LOCAL VOLUNTEERS CONDUCT FREE MEETINGS TO BENEFIT LOCAL MEMBERS

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FIFTH: Corporate address in Rhode Island LORRAINE NAULT 224 ANGEL RD. LINCOLN RI 02865

SIXTH: Names and addresses of its directors and officers: (In compliance with 7-6-23 of the R.I.G.L. 1956, Reenactment of 1994, the number of Directors of a corporation shall not be less than three (3).)

THIS REPORT WILL NOT BE ACCEPTED UNLESS THREE (3) DIRECTORS ARE LISTED.

NAME	OFFICE	ADDRESS
	Director	
	Director	
	Director	
	President	
	Vice-President	
	Secretary	
	Treasurer	

SEE ATTACHED LIST

(If additional space is needed, attach rider)
Dated: 5/2 19 97

PAID

MAY 08 1997
KID 2018U
SECY OF STATE

CH.A.D.D., INC
(Name of Corporation)
By Juli Dory
Title PRESIDENT

(Report must be signed by an officer)

CH.A.D.D. NATIONAL BOARD OF DIRECTORS
1996-1997

Julie Doy, President ('98)
916 45th Street
West Des Moines, IA 50265
Phone: 515-225-4196
Fax: 515-225-7089
E-mail: julie_doy@chadd.org

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Phone: 606-273-7378
Fax: 606-272-6325

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215 West 75th Street
New York, NY 10023-1799
Home: 212-724-9699
Work: 212-721-0007
Fax: 212-721-0074
E-mail: hal_meyer@chadd.org

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1250 Meirose Avenue
Iowa City, IA 52246
Home: 319-338-6844
Work: 319-333-2459
H/F: 319-351-0906
W/F: 319-333-3973
E-mail: mary_richard@chadd.org

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W/F: 715-838-1934
Home: 715-834-6635
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Work: 310-540-9233
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Fax: 954-792-8545
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Beaumont, NE 68310
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H/F: 402-228-7249
Work: 402-472-3479
W/F: 402-472-8412
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Sam Goldstein, Ph.D.
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230 South, 300 East, Suite 100
Salt Lake City, UT 84102
Work: 801-532-1484
Fax: 801-532-1486

* Term ends Rev. 10/1/96