

Filing Fee: \$20.00

To be filed annually during
the month of June

State of Rhode Island and Providence Plantations

NON-PROFIT CORPORATION

Corporate ID Number 0025530

Annual Report for the year 1993

FIRST: The name of the corporation is HOSPICE CARE OF RHODE ISLAND

SECOND: It is incorporated under the laws of _____

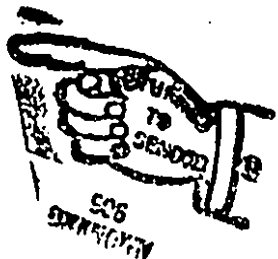
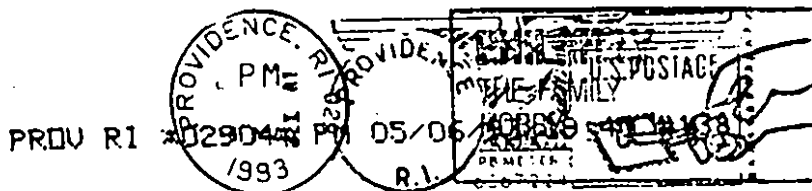
THIRD: The character of the affairs which it is actually conducting in Rhode Island, briefly stated, is _____

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 _____

FIFTH: Corporate address in Rhode Island _____

SIXTH: Names and addresses of its directors and officers:

Donald, Secretary of State
CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903



If the corporation has changed its registered office and/or its registered agent,
Form N-14 must be filed. Please contact Corporation Division for information, 277-3040
Mail with fee to: Corporations Division, 100 North Main Street, Providence, RI 02903.