



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1 - March 1 • Filing Fee: \$50.00
(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 7851		2. Name of Corporation T.O.T.A.L. Child, Inc.			
3. Business Office 244 Deerfield Road		Cranston		State RI	Zip 02920
4. SIC Code (401) 942-9955		5. State of Incorporation RHODE ISLAND			6. SIC Code 7880
7. Brief Description of the Character of Business Conducted in Rhode Island EDUCATIONAL TESTING AND SERVICES					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Officer Name Eileen M. Mullen		Officer Name Eileen M. Mullen			
244 Deerfield Road		244 Deerfield Road			
Cranston	State RI	Zip 02920	Cranston	State RI	Zip 02920
Eileen M. Mullen		Eileen M. Mullen			
244 Deerfield Road		244 Deerfield Road			
Cranston	State RI	Zip 02920	Cranston	State RI	Zip 02920
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Eileen M. Mullen		Director Name None.			
Street Address 244 Deerfield Road		Street Address			
Cranston	State RI	Zip 02920	City	State	Zip
Director Name None.		Director Name None.			
Street Address		Street Address			
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100	NO PAR VALUE		100	COMMON	NO PAR

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



FILED

File Date FEB 24 2005 4234

Check No. _____

By: KB

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.

Eileen M. Mullen 2/22/05
Signature of Officer Date
Eileen M. Mullen

Print or Type Name of Officer
President

Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 • Filing Fee: \$50.00
(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 7851		2. Name of Corporation T.O.T.A.L. Child, Inc.			
3. Principal Office 244 Deerfield Road		Cranston		RI	Zip 02920
4. Telephone (401) 942-9955		5. State of Incorporation RHODE ISLAND		6. SIC Code 7880	
7. Brief Description of the Character of Business Conducted in Rhode Island EDUCATIONAL TESTING AND SERVICES					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Eileen M. Mullen			Vice President Name Eileen M. Mullen		
Street Address 244 Deerfield Road			Street Address 244 Deerfield Road		
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920
Secretary Name Eileen M. Mullen			Treasurer Name Eileen M. Mullen		
Street Address 244 Deerfield Road			Street Address 244 Deerfield Road		
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Eileen M. Mullen			Director Name None.		
Street Address 244 Deerfield Road			Street Address		
City Cranston	State RI	Zip 02920	City	State	Zip
Director Name None.			Director Name None.		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100	NO PAR VALUE		100	common	no par

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



* 7 8 5 1 *

File Date 2-12-04
Check No. 4214
By: NMG
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.

Eileen M. Mullen 2/8/04
Signature of Officer Date
Eileen M. Mullen
Print or Type Name of Officer
President
Title of Officer



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

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. *7851*		2. Name of Corporation T.O.T.A.L. Child, Inc.	
3. Street Address Principal Business Office 244 DEERFIELD ROAD		City CRANSTON	State RI
4. Business Phone No. 4019429955		5. State of Incorporation RHODE ISLAND	6. SIC Code 7880

7. Brief Description of the Character of Business Conducted in Rhode Island
EDUCATIONAL TESTING AND SERVICES

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

President Name Eileen M. Mullen			Vice President Name Eileen M. Mullen		
Street Address 244 Deerfield Road			Street Address 244 Deerfield Road		
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920
Secretary Name Eileen M. Mullen			Treasurer Name Eileen M. Mullen		
Street Address 244 Deerfield Road			Street Address 244 Deerfield Road		
City Cranston	State RI	Zip 02920	City Cranston	State RI	Zip 02920

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

Director Name Eileen M. Mullen			Director Name		
Street Address 244 Deerfield Road			Street Address		
City Cranston	State RI	Zip 02920	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

10. SHARES AUTHORIZED (X) BOX FOR ATTACHMENT () **11. SHARES ISSUED** (X) BOX FOR ATTACHMENT ()

AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100	NO PAR VALUE		100	common	no par

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



* 7 8 5 1 *

**7851* 2/18/03 9:58:35 AM*

File Date: 2/20/03

Check No. 4194

By: [Signature]

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.

Eileen M. Mullen 2/20/03

Signature of Officer Date

Eileen M. Mullen

Print or Type Name of Officer

President

Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **7851**
2. Name of Corporation **T.O.T.A.L. Child, Inc.**
3. Street Address Principal Business Office
244 Deerfield Road
4. Business Phone No. **(401) 942-9955**
5. State of Incorporation **RHODE ISLAND**
7. Brief Description of the Character of Business Conducted in Rhode Island

City **Cranston** State **RI** Zip **02920**
6. SIC Code **7880**

Educational testing and services.

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

President Name
Eileen M. Mullen
Street Address
244 Deerfield Road
City State Zip
Cranston RI 02920
Secretary Name
Eileen M. Mullen
Street Address
244 Deerfield Road
City State Zip
Cranston RI 02920

Vice President Name
Eileen M. Mullen
Street Address
244 Deerfield Road
City State Zip
Cranston RI 02920
Treasurer Name
Eileen M. Mullen
Street Address
244 Deerfield Road
City State Zip
Cranston RI 02920

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

Director Name
Eileen M. Mullen
Street Address
244 Deerfield Road
City State Zip
Cranston RI 02920
None
Street Address
None
City State Zip

Director Name
None
Street Address
None
City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
100 NO PAR VALUE

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES
Number of Shares Class/Series Par Value
100 common no par

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



* 7 8 5 1 *

File Date: **FILED**
Check No.: **FEB 27 2002**
By: **41709E**
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.

Eileen M. Mullen 2/19/02
Signature of Officer Date
Eileen M. Mullen
Print or Type Name of Officer
President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **7851** 2. Name of Corporation **T.O.T.A.L. Child, Inc.**

3. Street Address Principal Business Office
244 Deerfield Road City **Cranston** State **RI** Zip **02920**

4. Business Phone No. **(401) 942-9955** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **7880**

7. Brief Description of the Character of Business Conducted in Rhode Island
Educational testing and services

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

President Name Eileen M. Mullen	Vice President Name Eileen M. Mullen
Street Address 244 Deerfield Road	Street Address 244 Deerfield Road
City State Zip Cranston RI 02920	City State Zip Cranston RI 02920
Secretary Name Eileen M. Millen	Treasurer Name Eileen M. Mullen
Street Address 244 Deerfield Road	Street Address 244 Deerfield Road
City State Zip Cranston RI 02920	City State Zip Cranston RI 02920

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

Director Name Eileen M. Mullen	Director Name None
Street Address 244 Deerfield Road	Street Address
City State Zip Cranston RI 02920	City State Zip
Director Name None	Director Name None
Street Address	Street Address
City State Zip	City State Zip

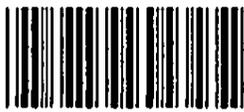
10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES	Class/Series	Par Value
100 NO PAR VAL		

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES	Class/Series	Par Value
100	common	no par

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



* 7 8 5 1 *

File Date: 3-12-01

Check No.: 4144

By: [Signature]

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.

Eileen M. Mullen 3/7/01
Signature of Officer Date

Eileen M. Mullen
Print or Type Name of Officer
President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **7851** 2. Name of Corporation **T.O.T.A.L. Child, Inc.**

3. Street Address Principal Business Office **244 Deerfield Road** City **Cranston** State **RI** Zip **02920**
4. Business Phone No. **(401) 942-9955** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **7880**

7. Brief Description of the Character of Business Conducted in Rhode Island

Educational testing and services.

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

President Name Eileen M. Mullen Street Address 244 Deerfield Road City State Zip Cranston RI 02920 Secretary Name Eileen M. Mullen Street Address 244 Deerfield Road City State Zip Cranston RI 02920	Vice President Name Eileen M. Mullen Street Address 244 Deerfield Road City State Zip Cranston RI 02920 Treasurer Name Eileen M. Mullen Street Address 244 Deerfield Road City State Zip Cranston RI 02920
--	---

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

Director Name Eileen M. Mullen Street Address 244 Deerfield Road City State Zip Cranston RI 02920	Director Name None. Street Address None. City State Zip None.
---	---

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES	Number of Shares	Class/Series	Par Value
	100	NO PAR VAL	

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES	Number of Shares	Class/Series	Par Value
	100	common	no par

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



* 7 8 5 1 *

File Date: 3/13/00
Check No.: 3707
By: [Signature]

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.

Eileen M. Mullen 3/9/00
Signature of Officer Date
Eileen M. Mullen
Print or Type Name of Officer
President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999

Filing Period: January 1-March 1 • Filing Fee: \$50.00



(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 7851		2. Name of Corporation T.O.T.A.L. Child, Inc.	
3. Street Address Principal Business Office 244 Deerfield Road		City Cranston	State RI
4. Business Phone No. (401) 942-9955		5. State of Incorporation RHODE ISLAND	6. SIC Code 7880

7. Brief Description of the Character of Business Conducted in Rhode Island
Educational testing and services.

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

President Name Eileen M. Mullen				Vice President Name Eileen M. Mullen			
Street Address 244 Deerfield Road				Street Address 244 Deerfield Road			
City Cranston	State RI	Zip 02920		City Cranston	State RI	Zip 02920	
Secretary Name Eileen M. Mullen				Treasurer Name Eileen M. Mullen			
Street Address 244 Deerfield Road				Street Address 244 Deerfield Road			
City Cranston	State RI	Zip 02920		City Cranston	State RI	Zip 02920	

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

Director Name Eileen M. Mullen				Director Name None.			
Street Address 244 Deerfield Road				Street Address			
City Cranston	State RI	Zip 02920		City	State	Zip	
Director Name None.				Director Name None.			
Street Address				Street Address			
City	State	Zip		City	State	Zip	

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES	Class/Series	Par Value
Number of Shares		
100 NO PAR VAL		

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES	Class/Series	Par Value
Number of Shares		
100	common	no par.

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



* 7 8 5 1 *

File Date: Feb 5, 99
Check No.: 3644
By: JD. / CM

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.

Eileen M. Mullen 2/2/99
Signature of Officer Date
Eileen M. Mullen
Print or Type Name of Officer
President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **7851** 2. Name of Corporation **T.O.T.A.L. Chlld, Inc.**
3. Street Address Principal Business Office **244 Deerfield Road** City **Cranston** State **RI** Zip **02920**
4. Business Phone No. **(401) 942-9955** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **7880**

7. Brief Description of the Character of Business Conducted in Rhode Island

Educational testing and services.

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

President Name **Eileen M. Mullen**
Street Address **244 Deerfield Road**
City **Cranston** State **RI** Zip **02920**
Secretary Name **Eileen M. Mullen**
Street Address **244 Deerfield Road**
City **Cranston** State **RI** Zip **02920**

Vice President Name **Eileen M. Mullen**
Street Address **244 Deerfield Road**
City **Cranston** State **RI** Zip **02920**
Treasurer Name **Eileen M. Mullen**
Street Address **244 Deerfield Road**
City **Cranston** State **RI** Zip **02920**

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

Director Name **Eileen M. Mullen**
Street Address **244 Deerfield Road**
City **Cranston** State **RI** Zip **02920**
Director Name **None**
Street Address
City State Zip

Director Name **None**
Street Address
City State Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES
Number of Shares Class/Series Par Value
100 NO PAR VAL

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

ISSUED SHARES
Number of Shares Class/Series Par Value
100 Common no par

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



* 7 8 5 1 *

File Date: 1-23-98
Check No.: 3114
By: [Signature]
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.

Eileen M. Mullen 1/16/98
Signature of Officer Date
Eileen M. Mullen
Print or Type Name of Officer
President
Title of Officer



PROFIT CORPORATION ANNUAL REPORT 1997

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. **7851** 2. Name of Corporation **T.O.T.A.L. Child, Inc.**

3. Street Address Principal Business Office **244 Deerfield Road** City **Cranston** State **RI** Zip **02920**

4. Business Phone No. **(401) 942-9955** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **7880**

7. Brief Description of the Character of Business Conducted in Rhode Island

Educational testing and services.

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

President Name Eileen M. Mullen	Vice President Name Eileen M. Mullen
Street Address 244 Deerfield Road	Street Address 244 Deerfield Road
City State Zip Cranston RI 02920	City State Zip Cranston RI 02920
Secretary Name Eileen M. Mullen	Treasurer Name Eileen M. Mullen
Street Address 244 Deerfield Road	Street Address 244 Deerfield Road
City State Zip Cranston RI 02920	City State Zip Cranston RI 02920

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

Director Name Eileen M. Mullen	Director Name None
Street Address 244 Deerfield Road	Street Address None
City State Zip Cranston RI 02920	City State Zip None
Director Name None	Director Name None
Street Address None	Street Address None
City State Zip None	City State Zip None

10. SHARES AUTHORIZED AND ISSUED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100 NO PAR VAL			100	Common	no par value

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



* 7 8 5 1 *

File Date: 2-18-97

Check No.: 3580

By: ICP / RGC

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.

Eileen M. Mullen Feb. 12, 1997
Signature of Officer Date

Eileen M. Mullen
Print or Type Name of Officer

President
Title of Officer

PROFIT CORPORATION ANNUAL REPORT

1996



State of Rhode Island and Providence Plantations
James R. Langevin, *Secretary of State*
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335 • (401) 277-3040

Filing Period: January 1-March 1
Filing Fee: \$50.00

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO. 7851		2. NAME OF CORPORATION T.O.T.A.L. Child, Inc.			
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 244 Deerfield Road			CITY Cranston	STATE RI	ZIP CODE 02920
4. BUSINESS PHONE NO. (401) 942-9955		5. STATE OF INCORPORATION RHODE ISLAND			6. SIC CODE 7880
7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND Educational testing and services					
8. NAMES AND ADDRESSES OF THE OFFICERS					
PRESIDENT NAME Eileen M. Mullen			VICE PRESIDENT NAME Same as above		
STREET ADDRESS 244 Deerfield Road			STREET ADDRESS		
CITY Cranston	STATE RI	ZIP CODE 02920	CITY	STATE	ZIP CODE
SECRETARY NAME Same as above			TREASURER NAME Same as above		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE
9. NAMES AND ADDRESSES OF THE DIRECTORS					
DIRECTOR NAME Eileen M. Mullen			DIRECTOR NAME None		
STREET ADDRESS 244 Deerfield Road			STREET ADDRESS		
CITY Cranston	STATE RI	ZIP CODE 02920	CITY	STATE	ZIP CODE
DIRECTOR NAME None			DIRECTOR NAME None		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE
10. SHARES AUTHORIZED AND ISSUED					
AUTHORIZED SHARES			ISSUED SHARES		
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE
100	NO PAR VAL		100	Common	no par value

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.

File Date:

2/27/96

Check No:

5964

By:

[Signature]

For Secretary of State Use Only

Signature of Officer

Eileen M. Mullen

Print or Type Name of Officer

President *Eileen M. Mullen*

Title of Officer

Date

DETACH BOTTOM BEFORE RETURNING

State of Rhode Island and Providence Plantations



Office of The Secretary of State
 100 North Main Street
 Providence, Rhode Island 02903-1335
 401-277-3040

ANNUAL REPORT

Please Type or Print
 File Annually - Jan. 1 - March 1
 Filing Fee \$50.00

Make Checks Payable to: Secretary of State

ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Corporate ID: 0007851 Annual Report for the year: 1995

Name of Corporation: T.O.T.A.L. Child, Inc.

Business entity organized under the laws of the State of: Rhode Island
 For foreign entity, address and telephone number of principal office:

Business Entity is (check one):
 Business Corporation (See RIGL Chapter 7-1.1)
 Professional Service Corporation (See RIGL Chapter 7-5.1)

Brief statement of the character of business conducted in Rhode Island:
 Educational testing and services.

Phone: ()
 Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):
 244 Deerfield Road
 Cranston, RI 02920

Phone: (401) 942-9955

THE NAMES OF THE OFFICERS ARE:

OFFICER	NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
PRESIDENT	Eileen M. Mullen	244 Deerfield Road	Cranston, RI	02920
VICE PRESIDENT	Eileen M. Mullen	244 Deerfield Road	Cranston, RI	02920
SECRETARY	Eileen M. Mullen	244 Deerfield Road	Cranston, RI	02920
TREASURER	Eileen M. Mullen	244 Deerfield Road	Cranston, RI	02920

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
Eileen M. Mullen	244 Deerfield Road	Cranston, RI	02920

NUMBER OF SHARES AUTHORIZED (Rider may be attached)	
Number of Shares	Class / Series
1	Common

NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)	
Number of Shares	Class / Series
100	no par value common

Date X January 18 19 95

By X Eileen M. Mullen
 Eileen M. Mullen
 PRINT OR TYPE NAME OF OFFICER SIGNING
 President
 TITLE OF OFFICER SIGNING

Form 31 1/95

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.

CATHY LAMARCA GIBSON
 128 DORANCE STREET, SUITE 450
 PROVIDENCE RI 02903

PAID
 MAY 20 1995
 2859

Filing Fee \$50.00
Payable to:
Secretary of State

PLEASE TYPE or PRINT
State of Rhode Island and Providence Plantations
Office of The Secretary of State
100 North Main Street
Providence, Rhode Island 02903-1335
401-277-3040

File Annually
LLC: Sept. 1 - Nov. 1
CORP: Jan. 1 - March 1

Corporate ID: 0007851 Annual Report for the year: 1994

Name of Business Entity: T.O.T.A.L. Child, Inc.

Business entity organized under the laws of the State of: RI

Federal Taxpayer Identification Number: [REDACTED]

For foreign entity, address and telephone number of principal office:

Phone: ()

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):

244 Deerfield Road
Cranston, RI 02920

Phone: (401) 942 - 9955

Business Entity is (check one):
 Business Corporation (See RIGL Chapter 7-1.1)
 Professional Service Corporation (See RIGL Chapter 7-5.1)
 Limited Liability Company (See RIGL 7-16)

Name, title and mailing address of contact person to whom communications may be directed:

Eileen M. Mullen, President
244 Deerfield Road
Cranston, RI 02920

Brief statement of the character of business conducted in Rhode Island:
Educational testing and services

Date of Organization: October 31, 1980

Date of Qualification to do business in Rhode Island (if foreign entity):

THE NAMES OF THE OFFICERS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<input type="checkbox"/> CHIEF EXECUTIVE OFFICER OR <input checked="" type="checkbox"/> PRESIDENT (Check One) <u>Eileen M. Mullen</u>	<u>244 Deerfield Road</u>	<u>Cranston, RI</u>	<u>02920</u>
<input type="checkbox"/> CHIEF OPERATING OFFICER OR <input checked="" type="checkbox"/> VICE PRESIDENT (Check One) <u>Eileen M. Mullen</u>	<u>244 Deerfield Road</u>	<u>Cranston, RI</u>	<u>02920</u>
<input type="checkbox"/> CUSTODIAN OF RECORDS OR <input checked="" type="checkbox"/> SECRETARY (Check One) <u>Eileen M. Mullen</u>	<u>244 Deerfield Road</u>	<u>Cranston, RI</u>	<u>02920</u>
<input type="checkbox"/> CHIEF FINANCIAL OFFICER OR <input checked="" type="checkbox"/> TREASURER (Check One) <u>Eileen M. Mullen</u>	<u>244 Deerfield Road</u>	<u>Cranston, RI</u>	<u>02920</u>

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>Eileen M. Mullen</u>	<u>244 Deerfield Road</u>	<u>Cranston, RI</u>	<u>02920</u>

NUMBER OF SHARES AUTHORIZED (If Applicable)	NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)
NUMBER <u>2,000</u>	NUMBER <u>100</u>
CLASS <u>common</u>	CLASS <u>common</u>
SERIES	SERIES
PAR VALUE OR WITHOUT PAR <u>without par value</u>	PAR VALUE OR WITHOUT PAR <u>without par value</u>

FILED
FEB 14 1994
By: 116591

Date: February 5, 1994

By: Eileen M. Mullen

Eileen M. Mullen
PRINT OR TYPE NAME OF OFFICER SIGNING
President
TITLE OF OFFICER SIGNING

Form 31 1/94

DESIGNATED REGISTERED OR RESIDENT AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the Corporation has changed its registered office and/or registered or resident agent, Form 9 or Form LLC 3 must be filed.

Cathy L. Gibson
128 Dorrance St., Suite 450
Prov., RI 02903

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0007851

Annual Report for the year 1993

FIRST: The name of the corporation is T.O.T.A.L. Child, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is To test development and sales

FOURTH: If foreign, corporation, address of its principal office _____

FIFTH: Business address in Rhode Island 1481 Wampanoag Trail, East Providence, Rhode Island

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
<u>EILEEN M. MULLEN</u>	Director	<u>244 Deerfield Rd., Cranston, RI</u>
	Director	
	Director	
<u>EILEEN M. MULLEN</u>	President	<u>244 Deerfield Rd., Cranston, RI</u>
	Vice-President	
<u>EILEEN M. MULLEN</u>	Secretary	<u>244 Deerfield Rd., Cranston, RI</u>
	Treasurer	

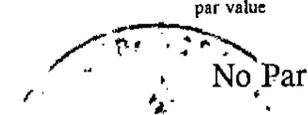
SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value of statement that shares are without par value
100	Common		No Par

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value of statement that shares are without par value
100	Common		No Par

Rec'd & Filed FEB 08 1993
ccr 2662



Dated: February 3, 1993

T.O.T.A.L. Child, Inc.
(Name of Corporation)

By: Eileen M. Mullen

Title: President

Filing Fee \$50.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

✓
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Corporate ID.....0007851..... Annual Report for the year.....1992.....

FIRST: The name of the corporation is.....T.O.T.A.L. Child, Inc.....

SECOND: It is incorporated under the laws of.....Rhode Island.....

THIRD: Character of business, briefly stated, is.....to test development and sales.....

FOURTH: If foreign corporation, address of its principal office.....

FIFTH: Business address in Rhode Island.....1481 Wampanoag Trail, East Providence, RI 02915.....

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Eileen M. Mullen	Director	244 Deerfield Road, Cranston, RI
Joseph T. Mullen	Director	244 Deerfield Road, Cranston, RI
	Director	
Eileen M. Mullen	President	244 Deerfield Road, Cranston, RI
Joseph T. Mullen	Vice President	244 Deerfield Road, Cranston, RI
Eileen M. Mullen	Secretary	244 Deerfield Road, Cranston, RI
Joseph T. Mullen	Treasurer	244 Deerfield Road, Cranston, RI

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100			No Par

Rec'd & Filed
SD 2438
FEB 25 1992

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100			No Par

Dated *February 21* 19 92 T.O.T.A.L. Child, Inc.

(Name of Corporation)
By *Eileen M. Mullen*
President

(Report must be signed by an officer)

Title.....

Filing Fee \$50.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID.....0007851..... Annual Report for the year.....1991.....

FIRST: The name of the corporation is.....T.O.T.A.L. Child, Inc.....

SECOND: It is incorporated under the laws of.....Rhode Island.....

THIRD: Character of business, briefly stated, is.....to test development and sales.....

FOURTH: If foreign corporation, address of its principal office.....

FIFTH: Business address in Rhode Island.....1481 Wampanoag Trail, East Providence, RI.....

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Eileen M. Mullen	Director	244 Deerfield Road, Cranston, RI
Joseph T. Mullen	Director	244 Deerfield Road, Cranston, RI
.....	Director
Eileen M. Mullen	President	244 Deerfield Road, Cranston, RI
Joseph T. Mullen	Vice President	244 Deerfield Road, Cranston, RI
Eileen M. Mullen	Secretary	244 Deerfield Road, Cranston, RI
Joseph T. Mullen	Treasurer	244 Deerfield Road, Cranston, RI

SEVENTH: Number of Shares authorized:

No. of Shares	Class
100	

Series PAID

Par Value
or statement that
shares are without
par value

No Par

FEB 10 1991

EIGHTH: Number of Shares issued:

No. of Shares	Class
100	

SECY OF STATE

Series

Par Value
or statement that
shares are without
par value

No Par

Dated February 12 19 91

T.O.T.A.L. Child, Inc.

(Name of Corporation)

By Eileen M. Mullen

Title President

(Report must be signed by an officer)

Filing Fee \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID.....0007851..... Annual Report for the year 1990.....

FIRST: The name of the corporation is.....T.O.T.A.L. Child, Inc.....

SECOND: It is incorporated under the laws of.....Rhode Island.....

THIRD: Character of business, briefly stated, is.....to test development and sales.....

FOURTH: If foreign corporation, address of its principal office.....

FIFTH: Business address in Rhode Island.....1481 Wampanoag Trail, East Providence, RI 02915.....

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Eileen M. Mullen	Director	244 Deerfield Road, Cranston, RI
Joseph T. Mullen	Director	244 Deerfield Road, Cranston, RI
Eileen M. Mullen	President	244 Deerfield Road, Cranston, RI
Joseph T. Mullen	Vice President	244 Deerfield Road, Cranston, RI
Eileen M. Mullen	Secretary	244 Deerfield Road, Cranston, RI
Joseph T. Mullen	Treasurer	244 Deerfield Road, Cranston, RI

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100			No Par

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100			No Par

PAID

FEB 28 1990

SECY. OF STATE

Dated February 24 1990

T.O.T.A.L. Child, Inc.

(Name of Corporation)

By Eileen M. Mullen
President

Title

(Report must be signed by an officer)

Filing Fee \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 0007851 Annual Report for the year 1989

FIRST: The name of the corporation is T.O.T.A.L. Child, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is test development and sales

FOURTH: If foreign corporation, address of its principal office.....

FIFTH: Business address in Rhode Island 1481 Wampanoag Trail, East Providence, RI 02915

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Eileen M. Mullen	Director	244 Deerfield Road, Cranston, RI
Joseph T. Mullen	Director	244 Deerfield Road, Cranston, RI
Eileen M. Mullen	Director	
Eileen M. Mullen	President	244 Deerfield Road, Cranston, RI
Joseph T. Mullen	Vice President	244 Deerfield Road, Cranston, RI
Eileen M. Mullen	Secretary	244 Deerfield Road, Cranston, RI
Joseph T. Mullen	Treasurer	244 Deerfield Road, Cranston, RI

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100			No Par

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100			No Par

PAID
FEB 24 1989
OFFICE STATE

Dated February 21 1989

T.O.T.A.L. Child, Inc.

(Name of Corporation)

By Eileen M. Mullen
President

Title.....

(Report must be signed by an officer)

Filing Fee \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

D.P.

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 7881 Annual Report for the year 1988

FIRST: The name of the corporation is T.O.T.A.L. Child, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is test development and sales

FOURTH: If foreign corporation, address of its principal office Not applicable

FIFTH: Business address in Rhode Island 1481 Wampanoag Trail, East Providence, RI 02915

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
<u>Eileen M. Mullen</u>	<u>Director</u>	<u>244 Deerfield Road, Cranston, RI</u>
<u>Joseph T. Mullen</u>	<u>Director</u>	<u>244 Deerfield Road, Cranston, RI</u>
	<u>Director</u>	
<u>Eileen M. Mullen</u>	<u>President</u>	<u>244 Deerfield Road, Cranston, RI</u>
<u>Joseph T. Mullen</u>	<u>Vice President</u>	<u>244 Deerfield Road, Cranston, RI</u>
<u>Eileen M. Mullen</u>	<u>Secretary</u>	<u>244 Deerfield Road, Cranston, RI</u>
<u>Joseph T. Mullen</u>	<u>Treasurer</u>	<u>244 Deerfield Road, Cranston, RI</u>

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>100</u>			<u>No Par</u>

PAID
FEB 25 1988
SECY OF STATE

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>100</u>			<u>No Par</u>

Dated Feb. 15 19 88

T.O.T.A.L. Child, Inc.
(Name of Corporation)

X By Eileen M. Mullen

(Report must be signed by an officer)

Title President

Filing Fee \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903



Corporate ID.....7851..... Annual Report for the year.....1985.....

FIRST: The name of the corporation is.....T.O.T.A.L. Child, Inc.....

SECOND: It is incorporated under the laws of.....the State of Rhode Island.....

THIRD: Character of business, briefly stated, is.....test development and sales.....

FOURTH: If foreign corporation, address of its principal office.....(not applicable).....

FIFTH: Business address in Rhode Island.....Two Thomas Street, Providence, Rhode
Island.....02903.....

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Eileen M. Mullen	Director	244 Deerfield Rd., Cranston, RI
Joseph T. Mullen	Director	(same as above)
Joseph P. Mullen	Director	306 Marlborough St., Boston, MA
Eileen M. Mullen	President	244 Deerfield Rd., Cranston, RI
Joseph T. Mullen	Vice President	(same as above)
Eileen M. Mullen	Secretary	(same as above)
Joseph T. Mullen	Treasurer	(same as above)

(Please see attachment)

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	N.A.	N.A.	No Par Value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	N.A.	N.A.	No Par Value

07/31/85 PAID

Dated.....July.....22....., 19 85.....

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 ANR
 CHIEF
 T.O.T.A.L. Child, Inc.
 (Name of Corporation)
 By Eileen M. Mullen
 Eileen M. Mullen
 President

(Report must be signed by an officer)

1985 Annual Report
T.O.T.A.L. Child, Inc.

Part 6 (continued)

Edward E. Mullen

Director

15 Hubbard St., Newton, MA

RECEIVED JAN 13 1984

Filing fee: \$15.00

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE

Annual Report for the year 1984

FIRST: The name of the corporation is T.O.T.A.L. Child, Inc.

SECOND: It is incorporated under the laws of the State of Rhode Island

THIRD: Character of business, briefly stated, is test development and sales

FOURTH: If foreign corporation, address of its principal office (Not Applicable)

FIFTH: Business address in Rhode Island

86 Weybosset St., Suite 508, Providence, R.I., 02903

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
Eileen M. Mullen	Director	244 Deerfield Rd., Cranston, RI
Joseph T. Mullen	Director	(same as above)
Joseph P. Mullen	Director	41 Lee St., Cambridge, MA
Eileen M. Mullen	President	244 Deerfield Rd., Cranston, RI
Joseph T. Mullen	Vice President	(same as above)
Eileen M. Mullen	Secretary	(same as above)
Joseph T. Mullen	Treasurer	(same as above)

(If additional space is needed, attach rider)

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	N.A.	N.A.	No Par Value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	N.A.	N.A.	No Par Value

Dated: January 19 84

T.O.T.A.L. Child, Inc.

(Name of Corporation)

By Eileen M. Mullen

Title President

(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent, Form #9 must be filed. Please contact Corporation Division for information. 277-3040

Filing fee: \$15.00

To be filed annually between
January 1st and March 1st

State of Rhode Island and Providence Plantations
OFFICE OF THE SECRETARY OF STATE

Annual Report for the year 1983

FIRST: The name of the corporation is T.O.T.A.L. Child, Inc.

SECOND: It is incorporated under the laws of the State of Rhode Island

THIRD: Character of business, briefly stated, is test development and sales

FOURTH: If foreign corporation, address of its principal office (Not Applicable)

FIFTH: Business address in Rhode Island (blank reports will be mailed to this address) 70 South Main Street, Providence, Rhode Island 02903

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
Eileen M. Mullen	Director	244 Deerfield Rd., Cranston, RI
Joseph T. Mullen	Director	(same as above)
Joseph P. Mullen	Director	306 Marlborough St., Boston, MA
Eileen M. Mullen	President	244 Deerfield Rd., Cranston, RI
Joseph T. Mullen	Vice President	(same as above)
Eileen M. Mullen	Secretary	(same as above)
Joseph T. Mullen	Treasurer	(same as above)

(If additional space is needed, attach rider)

(Please see attachment)

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	N.A.	N.A.	No Par Value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	N.A.	N.A.	No Par Value

Dated: February 14 1983 T.O.T.A.L. Child, Inc.

(Name of Corporation)

By Eileen M. Mullen

Title President

(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent, Form #9 must be filed. Please contact Corporation Division for information. 277-3040

1983 Annual Report

T.O.T.A.L. Child, Inc.

Part 6 (continued)

Edward E. Mullen

Director

15 Hubbard St., Newton, MA

Filing fee: \$15.00

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

Annual Report for the year 1982

FIRST: The name of the corporation is T.O.T.A.L. Child, Inc.

SECOND: It is incorporated under the laws of the State of Rhode Island

THIRD: Character of business, briefly stated, is test development and sales

FOURTH: If foreign corporation, address of its principal office (Not Applicable)

FIFTH: Business address in Rhode Island (blank reports will be mailed to this address) 70 South Main Street, Providence, Rhode Island 02903

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
Eileen M. Mullen	Director	244 Deerfield Rd., Cranston, R.I.
Joseph T. Mullen	Director	(same as above)
Joseph P. Mullen	Director	306 Marlborough St., Boston, MA.
Eileen M. Mullen	President	244 Deerfield Rd., Cranston, R.I.
Joseph T. Mullen	Vice President	(same as above)
Eileen M. Mullen	Secretary	(same as above)
Joseph T. Mullen	Treasurer	(same as above)

(If additional space is needed, attach rider) (Please see attachment)

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	N.A.	N.A.	No Par Value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
100	N.A.	N.A.	No Par Value

Dated: November 12, 1982

11
15
82
08
29
12
11
15
82

T.O.T.A.L. Child, Inc.
(Name of Corporation)

By Eileen M. Mullen
President

(Report must be signed by an officer)

NOV 15 1982

If the corporation has changed its registered office and/or its registered agent, Form #9 must be filed. Please contact Corporation Division for information. 277-3040

1982 Annual Report

T.O.T.A.L. Child, Inc.

Part 6 (continued)

Edward E. Mullen	Director	15 Hubbard St., Newton, MA
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Filing fee: \$15.00

To be filed annually
between January 1st and March 1st

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

ANNUAL REPORT

OF

Pursuant to the provisions of Section 7.1.1-118 of the General Laws, 1956, as amended, the undersigned corporation hereby submits the following annual report:

FIRST: The name of the corporation is T. O. T. A. L. Child, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: The address of its registered office in Rhode Island is 70 South Main St. Providence, R.I. 02903
and the name of its registered agent in Rhode Island at such address is Arlene Violet

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: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is Test development and sales

SIXTH: The names and respective addresses of its directors and officers are:

Name	Office	Address
<u>Eileen M. Mullen</u>	<u>Director</u>	<u>244 Deerfield Rd. Cranston, RI</u>
<u>Joseph J. Mullen</u>	<u>Director</u>	_____
<u>Arlene Violet</u>	<u>Director</u>	<u>70 South Main St. Prov. RI</u>
<u>Joseph P. Mullen</u>	<u>Director</u>	<u>306 Marlborough St. Boston, Mass.</u>
<u>Edward E. Mullen</u>	<u>Director</u>	<u>15 Hubbard St. Newton, Mass.</u>
_____	<u>Director</u>	_____
<u>Eileen M. Mullen</u>	<u>President</u>	_____
<u>Joseph J. Mullen</u>	<u>Vice President</u>	_____
<u>Eileen M. Mullen</u>	<u>Secretary</u>	_____
<u>Joseph T. Mullen</u>	<u>Treasurer</u>	_____

SEVENTH: The aggregate number of shares which it has authority to issue, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

Number of Shares	Class	Series	Par Value per Share or Statement that Shares are without Par Value
<u>100</u>	<u>N. A.</u>	<u>N. A.</u>	<u>No par value</u>

9802A14...15000
APR 13 1981
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EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
100	NA	NA	0
			:
			:

Dated February 28, 1981 T. O. T. A. L. Child, Inc.
(NAME OF CORPORATION)

By Eileen M. Mullen
Its President