



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 2005

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 17894		2. Name of Corporation PEZZELLI NURSING HOME, INC.			
3. Street Address Principal Business Office 100 Smithfield Road		City Providence		State RI	Zip 02904
4. Business Phone No. 401-353-1710		5. State of Incorporation RHODE ISLAND			6. SIC Code 9472
7. Brief Description of the Character of Business Conducted in Rhode Island SKILLED NURSING & REHABILITATION FACILITY					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name NORMA M. PEZZELLI			Vice President Name		
Street Address 103 OLNEY AVENUE			Street Address		
City Providence	State RI	Zip 02911	City	State	Zip
Secretary Name			Treasurer Name		
Street Address HOLDS ALL OFFICES			Street Address HOLDS ALL OFFICES		
City	State	Zip	City	State	Zip
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name			Director Name		
Street Address NONE			Street Address NONE		
City	State	Zip	City	State	Zip
Director Name NONE			Director Name NONE		
Street Address NONE			Street Address NONE		
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
600 COMM NO PAR VALUE			NONE		

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



File Date 1/18/05
Check No. 19095
By DA

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

NORMA M. PEZZELLI

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 2004

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

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 17894		2. Name of Corporation PEZZELLI NURSING HOME, INC.			
3. Street Address Principal Business Office 100 Smithfield Road		City NO. PROV.	State RI	Zip 02904	
4. Business Phone No. 401-353-1710		5. State of Incorporation RHODE ISLAND		6. SIC Code 9472	
7. Brief Description of the Character of Business Conducted in Rhode Island SKILLED NURSING & REHABILITATION FACILITY					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name NORMA M. PEZZELLI			Vice President Name NORMA M. PEZZELLI		
Street Address 103 OLNEY AVENUE			Street Address 103 OLNEY AVENUE		
City NO. PROV.	State RI	Zip 02911	City NO. PROV.	State RI	Zip 02911
Secretary Name ROBIN A. BROOKS			Treasurer Name NORMA M. PEZZELLI		
Street Address 161 HOLLAND ST. #404			Street Address 103 OLNEY AVENUE		
City CRANSTON	State RI	Zip 02920	City NO. PROV.	State RI	Zip 02911
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name NONE			Director Name NONE		
Street Address			Street Address		
City	State	Zip	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
600 COMM NO PAR VALUE			NONE		

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



* 17894 *

File Date 1-28-04
Check No. 17465
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.

Norma M. Pezzelli 1-8-2004
Signature of Officer Date

NORMA M. PEZZELLI
Print or Type Name of Officer

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



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

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

FORM MUST BE TYPED OR PRINTED IN BLACK

1. Corporate ID No.

17894

2. Name of Corporation

PEZZELLI NURSING HOME, INC.

3. Street Address Principal Business Office

100 SMITHFIELD ROAD

City

NORTH PROVIDENCE

State

RI

Zip

02904

4. Business Phone No.

401-353-1710

5. State of Incorporation

RHODE ISLAND

6. SIC Code

9472

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

SKILLED NURSING FACILITY

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

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

NORMA M. PEZZELLI

Vice President Name

Street Address

103 OLNEY AVENUE

Street Address

City

NORTH PROV.

State

RI

Zip

02904

City

Treasurer Name

Secretary Name

Street Address

City

State

Zip

City

State

Zip

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

FILL IN SPACES BEFORE USING ATTACHMENTS

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

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

600 COMM NO PAR VALUE

NONE

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



* 1 7 8 9 4 *

File Date: 4-21-03

Check No: 16331

By: IUP

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.

Norma M. Pezzelli
Signature of Officer Date

NORMA M. PEZZELLI
Print or Type Name of Officer

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



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.

17894

2 Name of Corporation

PEZZELLI NURSING HOME, INC.

3 Street Address Principal Business Office

100 SMITHFIELD ROAD

City

NORTH PROV

State

RI

Zip

02904

4 Business Phone No

401-353-1710

5 State of Incorporation

RHODE ISLAND

6 SIC Code

9472

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

SKILLED NURSING FACILITY

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

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

NORMA M. PEZZELLI

Vice President Name

HOLDS ALL OFFICES

Street Address

Street Address

City

103 OLNEY AVENUE

City

State

Zip

Secretary Name

HOLDS ALL OFFICES

Treasurer Name

HOLDS ALL OFFICES

Street Address

Street Address

City

State

Zip

City

State

Zip

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

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

N/A

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

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

600 COMM NO PAR VALUE

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

0

0

0

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



* 1 7 8 9 4 *

File Date: 3.11.02

Check No: 14340

By: Norma M. Pezzelli

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.

Norma M. Pezzelli 11/9/2002
Signature of Officer Date

NORMA M. PEZZELLI
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. 17894 2. Name of Corporation PEZZELLI NURSING HOME, INC.

3. Street Address Principal Business Office

City

State

Zip

100 Smithfield RoadNORTH PROVIDENCERI02904

4. Business Phone No.

5. State of Incorporation RHODE ISLAND6. 9472401-353-1710

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

SKILLED NURSING FACILITY

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

President Name

Vice President Name

NORMA M. PEZZELLI→ HOLDS ALL OFFICES

Street Address

Street Address

103 OLNEY AVENUE

City

State

Zip

City

State

Zip

NORTH PROVIDENCE RI 02904

Secretary Name

Treasurer Name

Street Address

Street Address

City

State

Zip

City

State

Zip

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

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

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

600 SHS NO PAR COM

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

NONE-0--0-

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



* 1 7 8 9 4 *

File Date: 1/30Check No.: 12730By: ec

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 Norma M. Pezzelli Date 1/19/2001Print or Type Name of Officer NORMA M. PEZZELLITitle of Officer President



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

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



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. <u>17894</u>		2. Name of Corporation <u>PEZZELLI NURSING HOME, INC.</u>	
3. Street Address Principal Business Office <u>100 SMITHFIELD ROAD</u>		City <u>NORTH PROVIDENCE</u>	State <u>R.I.</u>
4. Business Phone No. <u>401 353-1710</u>		5. State of Incorporation <u>RHODE ISLAND</u>	Zip <u>02904</u>
6. SIC Code <u>9472</u>			
7. Brief Description of the Character of Business Conducted in Rhode Island <u>SKILLED NURSING AND REHABILITATION FACILITY</u>			
8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name <u>NORMA M. PEZZELLI</u>		Vice President Name <u>PETER J. PEZZELLI</u>	
Street Address <u>103 OLNEY AVENUE</u>		Street Address <u>19 SOUTH HILLVIEW DRIVE</u>	
City <u>NO. PROVIDENCE</u>	State <u>R.I.</u>	City <u>NARRAGANSETT</u>	State <u>R.I.</u>
Zip <u>02911</u>		Zip <u>02882</u>	
Secretary Name		Treasurer Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name <u>NORMA M. PEZZELLI</u>		Director Name <u>PETER J. PEZZELLI</u>	
Street Address <u>103 OLNEY AVENUE</u>		Street Address <u>19 SOUTH HILLVIEW DRIVE</u>	
City <u>NO. PROVIDENCE</u>	State <u>R.I.</u>	City <u>NARRAGANSETT</u>	State <u>R.I.</u>
Zip <u>02911</u>		Zip <u>02882</u>	
Director Name		Director Name	
Street Address		Street Address	
City	State	City	State
Zip		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
<u>600 SHS</u>	<u>NO PAR</u>	<u>COM.</u>	<u>200</u>	<u>COMMON</u>	

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

FILED

File Date: SEP 20 2000

Check No.: CC12239

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.

Norma M. Pezzelli 9-29-00
Signature of Officer Date

NORMA M. PEZZELLI
Print or Type Name of Officer

PRESIDENT
Title of Officer



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

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



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. **17894** 2. Name of Corporation **PEZZELLI NURSING HOME, INC.**

3. Street Address Principal Business Office **100 Smithfield Road** City **N. Providence** State **RI** Zip **02904**
4. Business Phone No. **401 353-1710** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **9472**

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

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

President Name Norma M. Pezzelli	Vice President Name Peter J. Pezzelli
Street Address 103 Olney Ave.	Street Address 19 S. Hillview Dr.
City N. Providence State RI Zip 02911	City NARRAGANSETT State RI Zip 02882
Secretary Name	Treasurer Name

Street Address

Street Address

City State Zip City State Zip

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

Director Name Norma M. Pezzelli	Director Name Peter J. Pezzelli
Street Address 103 Olney Ave.	Street Address 19 S. Hillview Dr.
City N. Providence State RI Zip 02911	City NARRAGANSETT State RI Zip 02882
Director Name	Director Name

Street Address

Street Address

City State Zip City State Zip

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

AUTHORIZED SHARES

Number of Shares Class/Series Par Value

600 SHS NO PAR COM

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

ISSUED SHARES

Number of Shares Class/Series Par Value

200 Common NO PAR VALUE

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



* 1 7 8 9 4 *

File Date: **Jan 25, 99**

Check No.: **3907**

By: **JD.**

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.

Norma M. Pezzelli 1-19-99
Signature of Officer Date

Norma M. Pezzelli
Print or Type Name of Officer

President
Title of Officer



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

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040



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.

2. Name of Corporation

17894

PEZZELLI NURSING HOME, INC.

3. Street Address Principal Business Office

100 Smithfield Road

City

State

Zip

No. Providence RI

02904

4. Business Phone No.

5. State of Incorporation

6. SIC Code

401-353-1710

RHODE ISLAND

9472

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

SKILLED NURSING FACILITY

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

President Name

Norma M. Pezzelli

Vice President Name

Peter J. Pezzelli

Street Address

103 Olney Avenue

Street Address

19 S. Hillview Drive

City

State

Zip

No. Providence RI 02911

City

State

Zip

Narragansett RI 02882

Secretary Name

Treasurer Name

Street Address

Street Address

City

State

Zip

City

State

Zip

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

Director Name

Norma M. Pezzelli

Director Name

Peter J. Pezzelli

Street Address

103 Olney Avenue

Street Address

19 S. Hillview Drive

City

State

Zip

No. Providence RI 02911

City

State

Zip

Narragansett RI 02882

Director Name

Director Name

Street Address

Street Address

City

State

Zip

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

600 SHS NO PAR COM

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

200 Common No Par Value

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



* 1 7 8 9 4 *

File Date: 1-27-98

Check No.: 16740

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.

Norma M. Pezzelli 1-27-98
Signature of Officer Date

Norma M. Pezzelli

Print or Type Name of Officer

President

Title of Officer



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

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040



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. **17894** 2. Name of Corporation **PEZZELLI NURSING HOME, INC.**
3. Street Address Principal Business Office **100 Smithfield Road** City **No. Providence** State **RI** Zip **02904**
4. Business Phone No. **401-353-1710** 5. State of Incorporation **RHODE ISLAND** 6. SIC Code **9472**

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

SKILLED NURSING FACILITY

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

President Name				Vice President Name			
Norma M. Pezzelli				Peter J. Pezzelli			
Street Address				Street Address			
103 Olney Avenue				19 S. Hillview Drive			
City	State	Zip		City	State	Zip	
No. Providence	RI	02911		Narragansett	RI	02882	
Secretary Name				Treasurer Name			
Street Address				Street Address			
City				City			
State				State			
Zip				Zip			

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

Director Name				Director Name			
Norma M. Pezzelli				Peter J. Pezzelli			
Street Address				Street Address			
103 Olney Avenue				19 S. Hillview Drive			
City	State	Zip		City	State	Zip	
No. Providence	RI	02911		Narragansett	RI	02882	
Director Name				Director Name			
Susan K. Whipple				Lisa Pezzelli-Newberg			
Paul M. Pezzelli				Lauren Hickey			
Street Address				Street Address			
24 Greenwood Lane				10 Manning Terrace			
93-C Nimpuc Trail				10 Alison Avenue			
City	State	Zip		City	State	Zip	
Lincoln	RI	02865		Newport	RI	02840	
No. Providence	RI	02904		No. Providence	RI	02904	

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
600 SHS NO PAR COM			200	Common	No Par Value

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



* 1 7 8 9 4 *

File Date: 3-7-97
Check No: 9518
By: TOP

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.

Norma M. Pezzelli 2-28-97
Signature of Officer Date
Norma M. Pezzelli
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. 17894	2. NAME OF CORPORATION PEZZELLI NURSING HOME, INC.
3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE 100 Smithfield Road	CITY No. Providence
4. BUSINESS PHONE NO. 401-353-1710	STATE RI
5. STATE OF INCORPORATION RHODE ISLAND	ZIP CODE 02904
7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND SKILLED NURSING FACILITY	

8. NAMES AND ADDRESSES OF THE OFFICERS					
PRESIDENT NAME Norma M. Pezzelli			VICE PRESIDENT NAME Peter J. Pezzelli		
STREET ADDRESS 103 Olney Avenue			STREET ADDRESS 19 S. Hillview Drive		
CITY No. Providence	STATE RI	ZIP CODE 02911	CITY Narragansett	STATE RI	ZIP CODE 02882
SECRETARY NAME			TREASURER NAME		
STREET ADDRESS			STREET ADDRESS		
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE

9. NAMES AND ADDRESSES OF THE DIRECTORS					
DIRECTOR NAME Norma M. Pezzelli			DIRECTOR NAME Peter J. Pezzelli		
STREET ADDRESS 103 Olney Avenue			STREET ADDRESS 19 S. Hillview Drive		
CITY No. Providence	STATE RI	ZIP CODE 02911	CITY Narragansett	STATE RI	ZIP CODE 02882
DIRECTOR NAME Susan K. Whipple			DIRECTOR NAME Lisa Pezzelli-Newberg		
STREET ADDRESS 24 Greenwood Lane			STREET ADDRESS 10 Manning Terrace		
CITY Lincoln	STATE RI	ZIP CODE 02865	CITY Newport	STATE RI	ZIP CODE 02840
STREET ADDRESS 93-C Nimpuc Trail			STREET ADDRESS 10 Alison Avenue		
CITY No. Providence	STATE RI	ZIP CODE 02904	CITY No. Providence	STATE RI	ZIP CODE 02904

10. SHARES AUTHORIZED AND ISSUED					
AUTHORIZED SHARES			ISSUED SHARES		
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE
600 SHS	NO PAR COM		200	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: 1/22/96

Check No: 60636

By: [Signature]
For Secretary of State Use Only

[Signature]
Signature of Officer

Norma M. Pezzelli
Print or Type Name of Officer

President
Title of Officer

1/19/96
Date

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.

0017894

1995

Corporate ID: _____ Annual Report for the year: _____

PEZZELLI NURSING HOME, INC.

Name of Corporation: _____

Business entity organized under the laws of the State of: Rhode Island

Business Entity is (check one):

☒ Business Corporation (See RIGL Chapter 7-1.1)

☐ Professional Service Corporation (See RIGL Chapter 7-5.1)

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

Brief statement of the character of business conducted in Rhode Island:

Skilled Nursing Facility

Phone: ()

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

100 Smithfield RD

N. Providence, RI 02904

Phone: ()

THE NAMES OF THE OFFICERS ARE:

	STREET ADDRESS	CITY/STATE	ZIP CODE
PRESIDENT <u>Norma M. Pezzelli</u>	<u>103 Olney Avenue</u>	<u>N. Providence, RI</u>	<u>02911</u>
VICE PRESIDENT <u>Peter J. Pezzelli</u>	<u>19 S. Hillview Drive</u>	<u>Narragansett, RI</u>	<u>02882</u>
SECRETARY <u>Norma M. Pezzelli</u>	<u>103 Olney Avenue</u>	<u>N. Providence, RI</u>	<u>02911</u>
TREASURER <u>Peter J. Pezzelli</u>	<u>19 S. Hillview Drive</u>	<u>Narragansett, RI</u>	<u>02882</u>

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<u>Norma M. Pezzelli</u>	<u>103 Olney Avenue</u>	<u>N. Providence, RI</u>	<u>02911</u>
<u>Peter J. Pezzelli</u>	<u>19 S. Hillview Drive</u>	<u>Narragansett, RI</u>	<u>02882</u>
<u>Susan K. Whipple</u>	<u>24 Greenwood Lane</u>	<u>Lincoln, RI</u>	<u>02865</u>
<u>Paul M. Pezzelli</u>	<u>93-C Nimpuc Trail</u>	<u>N. Providence, RI</u>	<u>02904</u>
<u>Lisa Pezzelli-Newberg</u>	<u>10 Manning Terrace</u>	<u>Newport, RI</u>	<u>02840</u>
<u>Lauren Hickey</u>	<u>10 Allison Avenue</u>	<u>N. Providence, RI</u>	<u>02904</u>

NUMBER OF SHARES AUTHORIZED (Rider may be attached)

Number of Shares Class / Series

600

Common

NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)

Number of Shares Class / Series

200

Common

Date January 20, 1995

By:

Norma M. Pezzelli

PRINT OR TYPE NAME OF OFFICER SIGNING

President

TITLE OF OFFICER SIGNING

Form 31 195

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.

NORMA M. PEZZELLI
262 POPLAR ST.,
WONSOCKET RI 02885

CH 10336

BAR

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

29923
File Annually
LLC: Sept 1 - Nov 1
CORP: Jan 1 - March 1

Corporate ID: 0017894 Annual Report for the year: 1994

Name of Business Entity: Pezzelli Nursing Home Inc.

Business entity organized under the laws of the State of Rhode Island

Federal Taxpayer Identification Number: [REDACTED]

For foreign entity, address and telephone number of principal office

Phone: [REDACTED]

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

Golden Crest Nursing Centre

100 Smithfield Rd.

N. Providence, RI 02904

Phone: 401 353-1710

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:

Norma M. Pezzelli, President/Owner

262 Poplar Street

Woonsocket, RI 02895

Brief statement of the character of business conducted in Rhode Island.

Skilled Nursing Facility

Date of Organization

1969 5/15/68 rem

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

THE NAMES OF THE OFFICERS ARE:

OFFICE	NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
<input type="checkbox"/> CHIEF EXECUTIVE OFFICER OR <input checked="" type="checkbox"/> PRESIDENT (SEE RIGL 7-1.1)	Norma M. Pezzelli	103 Olney Avenue	N. Providence, RI	02911
<input type="checkbox"/> CHIEF OPERATING OFFICER OR <input checked="" type="checkbox"/> VICE PRESIDENT (SEE RIGL 7-1.1)	Peter J. Pezzelli	19 S. Hillview Drive	Narragansett, RI	02882
<input type="checkbox"/> CUSTODIAN OF RECORDS OR <input checked="" type="checkbox"/> SECRETARY (SEE RIGL 7-1.1)	Norma M. Pezzelli	103 Olney Avenue	N. Providence, RI	02911
<input type="checkbox"/> CHIEF FINANCIAL OFFICER OR <input checked="" type="checkbox"/> TREASURER (SEE RIGL 7-1.1)	Peter J. Pezzelli	19 S. Hillview Drive	Narragansett, RI	02882

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
Norma M. Pezzelli	103 Olney Avenue	N. Providence, RI	02911
Peter J. Pezzelli	19 S. Hillview Drive	Narragansett, RI	02882
Susan K. Whipple	24 Greenwood Lane	Lincoln, RI	02885
Paul M. Pezzelli	93-C Nimpuc Trail	N. Providence, RI	02904
Lisa Pezzelli-Newberg	10 Manning Terrace	Newport, RI	02840
Lauren Hickey	10 Alison Avenue	N. Providence, RI	02904

NUMBER OF SHARES AUTHORIZED (If Applicable)

NUMBER 600

CLASS Common

SERIES

PAR VALUE OR
WITHOUT PAR

No Par Value

NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)

NUMBER 200

CLASS Common

SERIES

PAR VALUE OR
WITHOUT PAR

No Par Value

Date February 23, 1994

By

Norma M. Pezzelli

Norma M. Pezzelli

ENTER TYPE NAME OF OFFICER SIGNING

President

ENTER OFFICER SIGNING

Form 31 1994

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

FILED

MAY 20 1994

By

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 0017894 Annual Report for the year 1993

FIRST: The name of the corporation is PEZZELLI NURSING HOME, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is operation of a nursing facility

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 262 Poplar Street, Woonsocket, RI 02895

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

Name	Office	Address (including number, street, zip code)
Norma M. Pezzelli	DIRECTOR	103 Olney Ave., N. Providence, RI 02911
Peter J. Pezzelli	Director	100 Smithfield Rd., N. Providence, RI 02911
Susan K. Whipple	DIRECTOR	100 Smithfield Rd., N. Providence, RI 02911
Lauren Hickey	Director	100 Smithfield Rd., N. Providence, RI 02911
Paul Pezzelli	DIRECTOR	100 Smithfield Rd., N. Providence, RI 02911
Lisa Pezzelli	Director	100 Smithfield Rd., N. Providence, RI 02911
Norma M. Pezzelli	President	103 Olney Ave., N. Providence, RI 02911
Peter J. Pezzelli	Vice President	100 Smithfield Rd., N. Providence, RI 02911
Norma M. Pezzelli	Secretary	103 Olney Ave., N. Providence, RI 02911
Norma M. pezzelli	Treasurer	013 Olney Ave., N. Providence, RI 02911

SEVENTH: Number of Shares authorized:

No. of Shares	Class
600	Common

Series

PAID

MAR 01 1993

Par Value
or statement that
shares are without
par value

No par value

EIGHTH: Number of Shares issued:

No. of Shares	Class
200	Common

SECY OF STATE

Series

Par Value
or statement that
shares are without
par value

No par value

Dated Jan 22, 1993

Pezzelli Nursing Home, Inc.
(Name of Corporation)

By Norma M. Pezzelli

(Report must be signed by an officer)

Title President

Filing Fee \$50.00

JAN 21 1992

28340

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 0017894

Annual Report for the year 1992

FIRST: The name of the corporation is PEZZELLI NURSING HOME, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Operation of a nursing facility

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 262 Poplar Street, Woonsocket, RI 02895

SIXTH: Names and addresses of its directors and officers:

(Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Norma M. Pezzelli	Director	103 Olney Ave., N. Providence, RI 02911
Peter J. Pezzelli	Director	100 Smithfield Rd., N. Prov., RI 02904
Susan K. Whipple	Director	100 Smithfield Rd., N. Prov. RI 02904
Lauren Hickey	Director	100 Smithfield Rd., N. Prov., RI 02904
Paul Pezzelli	Director	100 Smithfield Rd., N. Prov. RI 02904
Lisa Pezzelli	Director	100 Smithfield Rd., N. Prov. RI 02904
Norma M. Pezzelli	President	103 Olney Ave., N. Providence, RI 02911
Peter J. Pezzelli	Vice President	100 Smithfield Rd., N. Prov. RI 02904
Norma M. Pezzelli	Secretary	103 Olney Ave., N. Providence, RI 02911
Norma M. Pezzelli	Treasurer	103 Olney Ave., N. Providence, RI 02911

SEVENTH: Number of Shares authorized:

No. of Shares	Class
600	Common

Series

Par Value
or statement that
shares are without
par value

No Par Value

EIGHTH: Number of Shares issued:

No. of Shares	Class
200	Common

Series

Par Value
or statement that
shares are without
par value

No Par Value

Dated 2/20 19 92

Pezzelli Nursing Home, Inc.

(Name of Corporation)

By Norma M. Pezzelli

Title President

(Report must be signed by an officer)

Filing Fee \$50.00

DEC 31 1990

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 0017884 Annual Report for the year 1991

FIRST: The name of the corporation is PEZZELLI NURSING HOME, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is Operation of a nursing facility

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 262 Poplar Street, Woonsocket, RI 02895

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

Name	Office	Address (including number, street, zip code)
Norma M. Pezzelli	Director	103 Olney Ave., No. Providence, R.I. 02911
Peter J. Pezzelli	Director	100 Smithfield Rd., No. Providence, R.I. 02904
Susan K. Whipple	Director	100 Smithfield Rd., No. Providence, R.I. 02904
Lauren Hickey	Director	100 Smithfield Rd., No. Providence, R.I. 02904
Paul Pezzelli	Director	100 Smithfield Rd., No. Providence, R.I. 02904
Lisa Pezzelli	Director	100 Smithfield Rd., No. Providence, R.I. 02904
Norma M. Pezzelli	President	103 Olney Ave., No. Providence, R.I. 02911
Peter J. Pezzelli	Vice President	100 Smithfield Rd., No. Providence, R.I. 02904
Norma M. Pezzelli	Secretary	103 Olney Ave., No. Providence, R.I. 02911
Norma M. Pezzelli	Treasurer	103 Olney Ave., No. Providence, R.I. 02911

SEVENTH: Number of Shares authorized:

No. of Shares	Class
600	Common

PAID
FEB 27 1991
SECY OF STATE

Par Value
or statement that
shares are without
par value

No Par Value

EIGHTH: Number of Shares issued:

No. of Shares	Class
200	Common

Par Value
or statement that
shares are without
par value

No Par Value

Dated 2/25 19 91

Pezzeelli Nursing Home, Inc.
(Name of Corporation)

By Norma M. Pezzelli

Title President

(Report must be signed by an officer)

State of Rhode Island and Providence PlantationsCORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903Corporate ID 0017894 Annual Report for the year 1990FIRST: The name of the corporation is PEZZELLI NURSING HOME, INC.SECOND: It is incorporated under the laws of Rhode IslandTHIRD: Character of business, briefly stated, is Operation of a nursing home and
extended care facility.

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 262 Poplar Street, Woonsocket RI 02895

SIXTH: Names and addresses of its directors and officers:

(Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Norma M. Pezzelli	Director	103 Olney Ave., No. Providence, R.I. 02911
Peter J. Pezzelli	Director	100 Smithfield Rd., No. Providence, R.I. 02904
Susan K. Catallozzi	Director	100 Smithfield Rd., No. Providence, R.I. 02904
Lauren Hickey	Director	100 Smithfield Rd., No. Providence, R.I. 02904
Paul Pezzelli	Director	100 Smithfield Rd., No. Providence, R.I. 02904
Lisa Pezzelli	Director	100 Smithfield Rd., No. Providence, R.I. 02904
Norma M. Pezzelli	President	103 Olney Ave., No. Providence, R.I. 02911
Peter J. Pezzelli	Vice President	100 Smithfield Rd., No. Providence, R.I. 02904
Norma M. Pezzelli	Secretary	103 Olney Ave., No. Providence, R.I. 02911
Norma M. Pezzelli	Treasurer	103 Olney Ave., No. Providence, R.I. 02911

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series
600	Common	

Par Value
or statement that
shares are without
par value**PAID**

No Par Value

MAR 02 1990

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series
200	Common	

Par Value
or statement that
shares are without
par value

No Par Value

Dated 2/28 19 90

Pezzelli Nursing Home, Inc.

(Name of Corporation)

By Norma M. PezzelliTitle 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 0017884

Annual Report for the year 1989

FIRST: The name of the corporation is PEZZELLI NURSING HOME, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is operation of a nursing home
and extended care facility.

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 262 Poplar St., Woonsocket, RI 02895

SIXTH: Names and addresses of its directors and officers:

(Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
<u>Norma M. Pezzelli</u>	<u>Director</u>	<u>103 Olney Ave., No. Providence, RI 02911</u>
<u>Peter J. Pezzelli</u>	<u>Director</u>	<u>100 Smithfield Rd., No. Providence, RI 02904</u>
	<u>Director</u>	
<u>Norma M. Pezzelli</u>	<u>President</u>	<u>103 Olney Ave., No. Providence, RI 02911</u>
<u>Peter J. Pezzelli</u>	<u>Vice President</u>	<u>100 Smithfield Rd., No. Providence, RI 02904</u>
<u>Norma M. Pezzelli</u>	<u>Secretary</u>	<u>103 Olney Ave., No. Providence, RI 02911</u>
<u>Norma M. Pezzelli</u>	<u>Treasurer</u>	<u>103 Olney Ave., No. Providence, RI 02911</u>

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>600</u>	<u>Common</u>		<u>No par value</u>

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
<u>200</u>	<u>Common</u>		<u>No par value</u>

PAID

MAR 2 1989

SECY OF STATE

Dated 2-25 19 89

Pezzelli Nursing Home Inc.

(Name of Corporation)

By

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
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

DV

Corporate ID 17894

Annual Report for the year 1988

FIRST: The name of the corporation is PEZZELLI NURSING HOME, INC.

SECOND: It is incorporated under the laws of RHODE ISLAND

THIRD: Character of business, briefly stated, is operation of a nursing home
and extended care facility.

PAID

MAR 16 1988

FOURTH: If foreign corporation, address of its principal office

SECY. OF STATE

FIFTH: Business address in Rhode Island

262 Poplar St., Woonsocket RI 02895

SIXTH: Names and addresses of its directors and officers:

(Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Norma M. Pezzelli	Director	103 Olney Ave., No. Providence, RI
Peter J. Pezzelli	Director	100 Smithfield Rd., No. Providence, RI 02904
	Director	
Norma M. Pezzelli	President	103 Olney Ave., No. Providence, RI
Peter J. Pezzelli	Vice President	100 Smithfield Rd., No. Providence RI 02904
Norma M. Pezzelli	Secretary	103 Olney Ave., No. Providence RI
Norma M. Pezzelli	Treasurer	103 Olney Ave., No. Providence RI

SEVENTH: Number of Shares authorized:

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

EIGHTH: Number of Shares issued:

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

Dated 2-25 19 88

Pezzelli Nursing Home Inc.
(Name of Corporation)

By Norma M. Pezzelli
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
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 17894 Annual Report for the year 1987

FIRST: The name of the corporation is, PEZZELLI NURSING HOME, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is operation of a nursing home
and extended care facility.

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island

262 Poplar Street, Woonsocket, R.I. 02895

SIXTH: Names and addresses of its directors and officers:

(Attach rider if necessary)

Name

Office

Address (including number, street, zip code)

<u>Norma M. Pezzelli</u>	<u>Director</u>	<u>103 Olney Ave., No. Providence, R.I.</u>
<u>Peter J. Pezzelli</u>	<u>Director</u>	<u>100 Smithfield Rd., No. Providence, R.I. 02904</u>
	<u>Director</u>	
<u>Norma M. Pezzelli</u>	<u>President</u>	<u>103 Olney Ave., No. Providence, R.I.</u>
<u>Peter J. Pezzelli</u>	<u>Vice President</u>	<u>100 Smithfield Rd., No. Providence, R.I. 02904</u>
<u>Norma M. Pezzelli</u>	<u>Secretary</u>	<u>103 Olney Ave., No. Providence, R.I.</u>
<u>Norma M. Pezzelli</u>	<u>Treasurer</u>	<u>103 Olney Ave., No. Providence, R.I.</u>

SEVENTH: Number of Shares authorized:

No. of Shares

Class

600

Common

Par Value
or statement that
shares are without
par value

No Par Value

EIGHTH: Number of Shares issued:

No. of Shares

Class

200

Common

Par Value
or statement that
shares are without
par value

No Par Value

PAID
MAR 09 1987
SECY. OF STATE

05 1987

Dated 2-25 19 87

Pezzelli Nursing Home, Inc.
(Name of Corporation)

By Norma M. Pezzelli
Title President

(Report must be signed by an officer)

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 17894

Annual Report for the year 1986

FIRST: The name of the corporation is PEZZELLI NURSING HOME, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is operation of a nursing home
and extended care facility.

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island

262 Poplar Street, Woonsocket, R.I. 02895

SIXTH: Names and addresses of its directors and officers:

(Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
Norma M. Pezzelli	Director	103 Olney Ave., No. Providence, R.I.
Edward Pezzelli	Director	Wilson Ave., Rumford, R.I.
	Director	
Norma M. Pezzelli	President	103 Olney Ave., No. Providence, R.I.
Edward Pezzelli	Vice President	Wilson Ave., Rumford, R.I.
Norma M. Pezzelli	Secretary	103 Olney Ave., No. Providence, R.I.
Norma M. Pezzelli	Treasurer	103 Olney Ave., No. Providence, R.I.

SEVENTH: Number of Shares authorized:

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

EIGHTH: Number of Shares issued:

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

Dated 2/12/86 19 86

MAY 12 1986

(Report must be signed by an officer)

Pezzelli Nursing Home, Inc.

(Name of Corporation)

By

Norma M. Pezzelli

Title

President

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
270 WESTMINSTER MALL
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 17894

Annual Report for the year 1985

FIRST: The name of the corporation is PEZZELLI NURSING HOME, INC.

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and extended care facility

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island

262 Poplar Street, Woonsocket, RI

SIXTH: Names and addresses of its directors and officers:

(Attach rider if necessary)

Name

Office

Address (including number, street, zip code)

Norma M. Pezzelli

Director

103 Olney Ave., No. Providence, RI

Edward Pezzelli

Director

Wilson Ave., Rumford, RI

Director

Norma M. Pezzelli

President

103 Olney Ave., No. Providence, RI

Edward Pezzelli

Vice President

Wilson Ave., Rumford, RI

Norma M. Pezzelli

Secretary

103 Olney Ave., No. Providence, RI

Norma M. Pezzelli

Treasurer

103 Olney Ave., No. Providence, RI

SEVENTH: Number of Shares authorized:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

600

Common

No Par Value

RECEIVED MAR 1985

EIGHTH: Number of Shares issued:

No. of Shares

Class

Series

Par Value
or statement that
shares are without
par value

200

Common

No Par Value

Dated 3 20 19 85

Pezzelli Nursing Home, Inc.

(Name of Corporation)

By

Norma P. Pezzelli

(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
OFFICE OF THE SECRETARY OF STATE

Annual Report for the year 1984

FIRST: The name of the corporation is

PEZZELLI NURSING HOME, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is operation of a nursing home
and extended care facility

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island

262 Poplar Street, Woonsocket, RI

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
Norma M. Pezzelli	Director	103 Olney Ave., No. Providence, RI
Edward Pezzelli	Director	Wilson Ave., Rumford, RI
	Director	
Norma M. Pezzelli	President	103 Olney Ave., No. Providence, RI
Edward Pezzelli	Vice President	Wilson Ave., Rumford, RI
Norma M. Pezzelli	Secretary	103 Olney Ave., No. Providence, RI
Norma M. Pezzelli	Treasurer	103 Olney Ave., No. Providence, RI

(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
600	Common		No Par Value

EIGHTH: Number of Shares issued:

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

Dated: 8/16/84 19 84

3 28 84 Pezzelli Nursing Home, Inc.

(Name of Corporation)

By Norma P. Pezzelli

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

PEZZELLI NURSING HOME, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is operation of a nursing home
and extended care facility

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island (blank reports will be mailed to this
address) 262 Poplar Street, Woonsocket, RI

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
Norma M. Pezzelli	Director	103 Olney Ave., No. Providence, RI
Edward Pezzelli	Director	Wilson Ave., Rumford, RI
	Director	
Norma M. Pezzelli	President	103 Olney Ave., No. Providence, RI
Edward Pezzelli	Vice President	Wilson Ave., Rumford, RI
Norma M. Pezzelli	Secretary	103 Olney Ave., No. Providence, RI
Norma M. Pezzelli	Treasurer	103 Olney Ave., No. Providence, RI

(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
600	Common		No Par Value

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
200	Common	3 11 03	No Par Value

Dated:

1983

Pezzelli Nursing Home, Inc.

(Name of Corporation)

By

Norma M. Pezzelli

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 1982

FIRST: The name of the corporation is

PEZZELLI NURSING HOME, INC.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: Character of business, briefly stated, is operation of a nursing home
and extended care facility

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island (blank reports will be mailed to this
address) 262 Poplar Street, Woonsocket, R.I.

SIXTH: Names and addresses of its directors and officers:

(Addresses must include street and number, if any)

Name	Office	Address
Norma M. Pezzelli	Director	103 Olney Ave., No. Providence, R.I.
Edward Pezzelli	Director	Wilson Ave., Rumford, R.I.
	Director	
Norma M. Pezzelli	President	103 Olney Ave., No. Providence, R.I.
Edward Pezzelli	Vice President	Wilson Ave., Rumford, R.I.
Norma M. Pezzelli	Secretary	103 Olney Ave., No. Providence, R.I.
Norma M. Pezzelli	Treasurer	103 Olney Ave., No. Providence, R.I.

(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
600	Common		No Par Value

EIGHTH: Number of Shares issued:

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

Dated: 3-25 1982

Pezzelli Nursing Home, Inc.
(Name of Corporation)

By *Norma P. Pezzelli*

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

OF

PEZZELLI NURSING HOME, INC.

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 Pezzelli Nursing Home, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: The address of its registered office in Rhode Island is
262 Poplar Street, Woonsocket

and the name of its registered agent in Rhode Island at such address is
Norma M. Pezzelli

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 operation of a nursing home and extended care facility

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

Name	Office	Address
Norma M. Pezzelli	Director	103 Olney Avenue, No. Providence, R.I.
Edward Pezzelli	Director	Wilson Avenue, Rumford, R.I.
	Director	
	Director	
	Director	
	Director	
Norma M. Pezzelli	President	103 Olney Ave., No. Providence, R.I.
Edward Pezzelli	Vice President	Wilson Avenue, Rumford, R.I.
Norma M. Pezzelli	Secretary	103 Olney Ave., No. Providence, R.I.
Norma M. Pezzelli	Treasurer	103 Olney Ave., No. Providence, R.I.

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
600	Common		No Par Value

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APR 1 1981
R

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>
200	Common		No Par Value

Dated March 1, 19 81

Pezzealli Nursing Home, Inc.
(NAME OF CORPORATION)

By *Norman M. Pezzealli*
its President

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**

PEZZELLI NURSING HOME, INC.

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 Pezzelli Nursing Home, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: The address of its registered office in Rhode Island is
262 Poplar Street, Woonsocket

and the name of its registered agent in Rhode Island at such address is
Norma M. Pezzelli

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 operation of a nursing home and extended care facility

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

Name	Office	Address
Norma M. Pezzelli	Director	103 Olney Avenue, N. Prov., R.I.
Edward Pezzelli	Director	Wilson Avenue, Rumford, R.I.
	Director	
	Director	
	Director	
	Director	
Norma M. Pezzelli	President	103 Olney Ave., N. Prov., R.I.
Edward Pezzelli	Vice President	Wilson Avenue, Rumford, R.I.
Norma M. Pezzelli	Secretary	103 Olney Ave., N. Prov., R.I.
Norma M. Pezzelli	Treasurer	103 Olney Ave., N. Prov., R.I.

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
600	Common		No Par Value

2941A14...150081

JAN 29 1980
JMA

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>
200	Common		No Par Value

Dated February 13, 1980

Pezzelli Nursing Home, Inc.

(NAME OF CORPORATION)

By *Mario P. Pezzelli*
Its President

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

1978 ANNUAL REPORT 1978
OF

PEZZELLI NURSING HOME, INC.

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 Pezzelli Nursing Home, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: The address of its registered office in Rhode Island is 1000 Smith Street, Providence, Rhode Island 02908
and the name of its registered agent in Rhode Island at such address is Paul J. Bordicri, Esq.

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 operation of a nursing home and extended health care facility.

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

Name	Office	Address
Pasquale Pezzelli, Jr.	Director	35 Douglas Terrace, No. Prov., R.I.
Norma M. Pezzelli	Director	103 Olney Ave., No. Prov., R.I.
	Director	
	Director	
	Director	
Pasquale Pezzelli, Jr.	President	35 Douglas Terrace, No. Prov., R.I.
Norma M. Pezzelli	Vice President	103 Olney Ave., No. Prov., R.I.
Norma M. Pezzelli	Secretary	" " " "
Pasquale Pezzelli, Jr.	Treasurer	35 Douglas Terrace, No. Prov., R.I.

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	5 18 78 Series	Par Value per Share or Statement that Shares are without Par Value
600	Common		No Par Value

6155A14...150081

JUL 23 1979
Credit to 1979

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>
200	Common		No Par Value

Dated ☒ 5/16, 1978

PEZZELLI NURSING HOME, INC.
(NAME OF CORPORATION)

By *James Pezzelli, Pres*
Its *Pres*

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

Pezzelli Nursing Home, Inc.

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 Pezzelli Nursing Home, Inc.

SECOND: It is incorporated under the laws of R.I.

THIRD: The address of its registered office in Rhode Island is

ONE THOUSAND SMITH STREET, PROVIDENCE

and the name of its registered agent in Rhode Island at such address is

PAUL J. BORDIERI

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 any lawful purpose.

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

Name	Office	Address
Pasquale Pezzelli	Director	100 Smithfield Rd., N. Prov.
Norma Pezzelli	Director	103 Olney Ave., N. Prov.
	Director	
	Director	
	Director	
	Director	
Pasquale Pezzelli, Jr.	President	100 Smithfield Ave., N. Prov.
Norma Pezzelli	Vice President	103 Olney Ave., N. Prov.
"	Secretary	"
Pasquale Pezzelli	Treasurer	100 Smithfield Rd., N. Prov.

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
600	Common		No Par Value

FEB 23 1978

[Signature]

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:

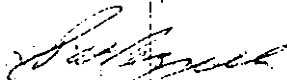
<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
200	Common		No Par Value

Dated January 20, 1978

Pezzelli Nursing Home, Inc.

(NAME OF CORPORATION)

By



Its President

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

Pezzelli Nursing Home

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 Pezzelli Nursing Home

SECOND: It is incorporated under the laws of R.I.

THIRD: The address of its registered office in Rhode Island is

1000 Smith St., Prov.

and the name of its registered agent in Rhode Island at such address is

Paul J. Bordieri

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 any lawful purpose

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

Name	Office	Address
Pasquale Pezzelli, Jr.	Director	100 Smithfield Rd., Prov.
Norma P. Pezzelli	Director	103 Olney Ave., N. Prov.
	Director	
	Director	
	Director	
Pasquale Pezzelli, Jr.	President	100 Smithfield Rd, Prov.
Norma Pezzelli	Vice President	103 Olney Ave., N. Prov.
Norma Pezzelli	Secretary	same
Pasquale Pezzelli, Jr.	Treasurer	100 Smithfield Rd, Prov.

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
600	Common		No Par Value

JAN 31 1977

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>
200	Common		No Par Value

Dated: 1/27

1977

Pezzelli Nursing Home, Inc.
(NAME OF CORPORATION)

By

[Signature]

Its

President

9/29/76 cmd

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

Pezzelli Nursing Home, Inc.

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 Pezzelli Nursing Home, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: The address of its registered office in Rhode Island is

One Thousand Smith Street, Providence, RI

and the name of its registered agent in Rhode Island at such address is

Paul J. Bordieri, Esq.

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 any lawful purpose.

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

Name	Office	Address
Pasquale Pezzelli	Director	100 Smithfield Road, Providence RI
Noram P. Pezzelli	Director	103 Olney Ave., No. Prov., RI
	Director	
	Director	
	Director	
	Director	
Pasquale Pezzelli	President	100 Smithfield Rd. Providence, RI
Norma Pezzelli	Vice President	103 Olney Ave., No. Prov., RI
" "	Secretary	" " "
Pasquale Pezzelli	Treasurer	100 Smithfield Rd., Prov., RI

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
600	Common		No Par Value

OCT 7 1976

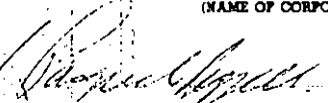
EIGHTH: The aggregate number of its issued shares, itemized by classes, par value of shares, shares without par value, and series, if any, within a class, is:

<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>
200	Common		No Par Value

Dated September 29, 19 76

Pezzelli Nursing Home, Inc.
(NAME OF CORPORATION)

By



is President

41-776 STATE 1002 1200**15.00

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 1975
ANNUAL REPORT
OF

PEZZELLI NURSING HOME, INC.

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 **PEZZELLI NURSING HOME, INC.**

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

THIRD: The address of its registered office in Rhode Island is
100 Smithfield Road, North Providence, Rhode Island

and the name of its registered agent in Rhode Island at such address is
Paul J. Bordieri, 1000 Smith Street, Providence, R.I. 02908

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 **Any lawful purpose**

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

Name	Office	Address
Pasquale Pezzelli, Jr.	Director	100 Smithfield Rd., No. Prov., R.I.
Norma P. Pezzelli	Director	103 Olney Ave., No. Prov., R.I.
	Director	
	Director	
	Director	
	Director	
Pasquale Pezzelli, Jr.	President	100 Smithfield Rd., No. Prov., R.I.
Norma Pezzelli	Vice President	103 Olney Ave., No. Prov., R.I.
"	Secretary	"
Pasquale Pezzelli, Jr.	Treasurer	100 Smithfield Rd., No. Prov., R.I.

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
600	no par common		

FEB 14 1976

JS

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>
200	no par common		

Dated 2/6, 1976

PEZZELLI NURSING HOME, INC.
(NAME OF CORPORATION)

By [Signature]
Its Pres.

DL-2-76 MAR 11 1976 15.00

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

**1974 ANNUAL REPORT
OF**

PEZZELLI NURSING HOME, INC.

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 Pezzelli Nursing Home, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: The address of its registered office in Rhode Island is
824 Industrial Bank Building, Providence, Rhode Island 02903
and the name of its registered agent in Rhode Island at such address is
Edward S. Goldin, Esquire

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
n/a

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is nursing home

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

Name	Office	Address
Pasquale Pezzelli, Jr.	Director	100 Smithfield Rd., No. Prov., R.I.
Norma P. Pezzelli	Director	same
	Director	
	Director	
	Director	
Pasquale Pezzelli, Jr.	President	same
Norma P. Pezzelli	Vice President	same
Norma P. Pezzelli	Secretary	same
Pasquale Pezzelli, Jr.	Treasurer	same

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
600	common	--	no par value

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>
200	common	--	no par. value

Dated February 21, 194

Pezzelli Nursing Home, Inc.
(NAME OF CORPORATION)

By

Pasquale Pezzelli
Pasquale Pezzelli
Its President

WV 16-74 STATE 430 40***15.00

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
1973
ANNUAL REPORT
OF

PEZZELLI NURSING HOME, INC.

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 Pezzelli Nursing Home, Inc.

SECOND: It is incorporated under the laws of Rhode Island

THIRD: The address of its registered office in Rhode Island is

824 Industrial Bank Building, Providence, Rhode Island

and the name of its registered agent in Rhode Island at such address is

Edward S. Goldin, Esquire

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 nursing home

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

Name	Office	Address
Pasquale Pezzelli, Jr.	Director	100 Smithfield Rd., No., Prov., R.I.
Norma P. Pezzelli	Director	same
	Director	
	Director	
	Director	
	Director	
Pasquale Pezzelli, Jr.	President	same
Norma P. Pezzelli	Vice President	same
Norma P. Pezzelli	Secretary	same
Pasquale Pezzelli, Jr.	Treasurer	same

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
600	common	-	no par value

FEB 14 1973

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>
200	common	-	no par value

Dated Jan 22, 1973

PEZZELLI NURSING HOME, INC.
(NAME OF CORPORATION)

By [Signature]

Its

REC-16-73 STATE OF N.Y. 15.00

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

1972 ANNUAL REPORT

OF

PEZZELLI NURSING HOME, INC.

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 **PEZZELLI NURSING HOME, INC.**

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

THIRD: The address of its registered office in Rhode Island is
824 Industrial Bank Building, Providence, Rhode Island 02903

and the name of its registered agent in Rhode Island at such address is
Edward S. Goldin, Esquire

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

n/a

FIFTH: The character of the business in which it is actually engaged in Rhode Island, briefly stated, is **nursing home**

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

Name	Office	Address
Pasquale Pezzelli, Jr.	Director	100 Smithfield Road, No. Prov., R.I.
Norma P. Pezzelli	Director	(as above)
	Director	
	Director	
	Director	
	Director	
Pasquale Pezzelli, Jr.	President	(as above)
Norma P. Pezzelli	Vice President	(as above)
Norma P. Pezzelli	Secretary	(as above)
Pasquale Pezzelli, Jr.	Treasurer	(as above)

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
600	common	--	without par value

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>
200	common	---	without par value

Dated January 10, 1972.

PEZZELLI NURSING HOME, INC.
(NAME OF CORPORATION)

By 
Pasquale Pezzelli, Jr.
Its President

91 25 72 51 091 18 *** 18 0

Filing fee: \$10.00

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

State of Rhode Island and Providence Plantations

OFFICE OF THE SECRETARY OF STATE

1971 ANNUAL REPORT

OF

PEZZELLI NURSING HOME, INC.

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 **PEZZELLI NURSING HOME, INC.**

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

THIRD: The address of its registered office in Rhode Island is **824 Industrial National Bank Building, Providence, Rhode Island 02903**
and the name of its registered agent in Rhode Island at such address is
Edward S. Goldin

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 **nursing home**

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

Name	Office	Address
Pasquale Pezzelli, Jr.	Director	100 Smithfield Road, North Providence,
Norma P. Pezzelli	Director	as above R.I.
	Director	
	Director	
	Director	
	Director	
Pasquale Pezzelli, Jr.	President	as above
Norma P. Pezzelli	Vice President	as above
Norma P. Pezzelli	Secretary	as above
Pasquale Pezzelli, Jr.	Treasurer	as above

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
600	common	-	no par value

NOV 29 1971
JS

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:

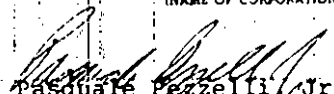
<u>Number of Shares</u>	<u>Class</u>	<u>Series</u>	<u>Par Value per Share or Statement that Shares are without Par Value</u>
200	common	-	no par value

NINTH: The amount of its stated capital as of the close of business on December 31 next preceding the date hereof was \$ 10,000.00.

Dated October 26, 1971.

PEZZELLI NURSING HOME, INC.
(NAME OF CORPORATION)

By


Pasquale Pezzelli, Jr.
President

STATE OF NEW YORK
JAN 10 1972