



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2021

Corporation

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

FILED

MAR 1 2021

BY *[Signature]* 130

1. Entity ID Number 001692341		2. Exact name of the Corporation Timberline Recovery Homes of New England, Inc.			
3. Principal Office Address 46 Millers Brook Drive			City Cumberland	State RI	Zip 02864
4. NAICS Code 623220		6. Brief description of the character of business conducted in Rhode Island To promote and encourage peer living connections and support leading to long-term friendships and sober living for a lifetime			
5. State of Incorporation Rhode Island					
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name Raymond Leung			Vice-President Name Mihir Shah		
Street Address 2 Williams Street			Street Address 2 Williams Street		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
Secretary Name Raymond Leung			Treasurer Name Mihir Shah		
Street Address 2 Williams Street			Street Address 2 Williams Street		
City Providence	State RI	Zip 02903	City Providence	State RI	Zip 02903
8. List ALL directors (names and addresses) Check the box to indicate an attachment ☐					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized			10. Shares Issued Check the box to indicate an attachment ☐		
This information is currently of record in the Department of State. Changes require an additional filing.			NUMBER OF SHARES		
			CLASS/SERIES		PAR VALUE
			800	CNP	\$0.00
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the 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.					
Name of Authorized Representative				Date 2/17/21	
Signature of Authorized Representative <i>[Signature]</i>					

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.n.gov

FORM 630 - Revised: 08/2020

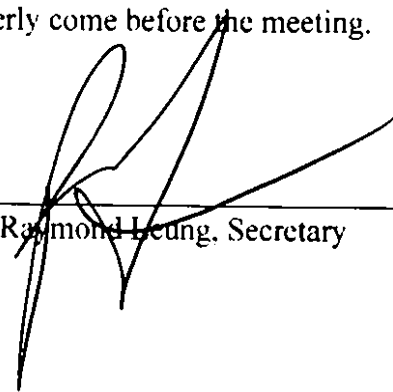
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NOTICE OF ANNUAL MEETING OF
TIMBERLINE RECOVERY HOMES OF NEW ENGLAND, INC

TO: Shareholders of Timberline Recovery Homes of New England, Inc

Please take notice that the Annual Meeting of the Shareholders of Timberline Recovery Homes of New England, Inc, will be held at the offices of Timberline Recovery Homes of New England, Inc on February 1, 2021, at 10:00 a.m., for the purpose of electing officers of the Corporation and for any other business as may properly come before the meeting.

By order of Raymond Leung.



Raymond Leung, Secretary

Dated: February 1, 2021