

Filing Fee: \$20.00

To be filed annually during the month of June



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Corporations Division
100 North Main Street Providence, Rhode Island 02903-1335
Telephone (401) 222-3040

NON-PROFIT CORPORATION

Corporate ID Number DNP-120575 Annual Report for the year 2002

- 1. The name of the corporation is Northern Rhode Island United Nurses & Allied Professionals Local 5067, Inc.
2. The state or other jurisdiction under the laws of which it is incorporated is RHODE ISLAND
3. The address of the registered office of the corporation in this state is 501 GREAT ROAD, UNIT 204 NORTH SMITHFIELD, RI 02896-
and the name of its registered agent in this state at that address is JEN PESO
4. The character of the affairs which it is actually conducting in Rhode Island, briefly stated, is Union business advocate for patients by nurses
5. If a foreign corporation, the address of its principal office in the state or other jurisdiction under the laws of which it is incorporated is
6. Corporate address in Rhode Island Northern R.I. United Nurses & Allied Professionals Local 5067, Inc. 501 Great Rd Unit 204, North Smithfield, RI 02896
7. Names and addresses of its directors and officers: (In compliance with 7-6-23 of the R.I.G.L. 1956, as amended, the number of directors of a domestic (Rhode Island) corporation shall not be less than three (3).)

NAME OFFICE ADDRESS

Table with 3 columns: NAME, OFFICE, ADDRESS. Rows include: Jen Peso (Director, 51 Westwood Rd. N. Smithfield, RI), Patricia Hazebrouck (Director, 202 Thayer St. Millis, Mass), Pauline Tessitore (Director, 44 Dudley St. Woon. R.I. 02895), Jen Peso (President, 51 Westwood Rd. N. Smithfield, R.I.), Patricia Hazebrouck SR (Vice-President, 202 Thayer St. Millis, Mass), Lisa Beauregard (Secretary, 653 4th Ave. Woon. A.I.), Pauline Tessitore (Treasurer, 44 Dudley St. Woon. A.I.)

Dated: 6/28/02

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.



FOR SECRETARY OF STATE USE ONLY

File Date: 9-23-02
Check No.: 4762
By: [Signature]

Expressed by Corporation:

By Pauline Tessitore
Title Treasurer

(Report must be signed by an officer)