



State of Rhode Island

## Department of State - Business Services Division

Annual Report for the year: 2023  
Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

FILED

MAR 02 2023

BY 3101

1. Entity ID Number 186279		2. Exact name of the Corporation Elizabeth G. Heiss Ph.D., Ltd.			
3. Principal Office Address 16 Canonchet Lane			City Warwick	State RI	Zip 02888
4. NAICS Code 621330		6. Brief description of the character of business conducted in Rhode Island Operation of a Psychology Practice			
5. State of Incorporation RI					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name Dr. Elizabeth G. Heiss			Vice-President Name None		
Street Address 16 Canonchet Lane			Street Address		
City Warwick	State RI	Zip 02888	City	State	Zip
Secretary Name Dr. Elizabeth G. Heiss			Treasurer Name Dr. Elizabeth G. Heiss		
Street Address 16 Canonchet Lane			Street Address 16 Canonchet Lane		
City Warwick	State RI	Zip 02888	City Warwick	State RI	Zip 02888
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name Dr. Elizabeth G. Heiss			Director Name None		
Street Address 16 Canonchet Lane			Street Address		
City Warwick	State RI	Zip 02888	City	State	Zip
Director Name None			Director Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized		10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
This information is currently of record in the Department of State.  Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	PAR VALUE
		100	Common	No Par Value	
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 Dr. Elizabeth G. Heiss				Date 1/24/23	
Signature of Authorized Representative 					

## MAIL TO:

Division of Business Services

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Website: www.sos.ri.gov