



**State of Rhode Island
Office of the Secretary of State**

Fee: \$20.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Non-Profit Corporation
Annual Report**

Filing Period: February 1 - May 1

In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2025: 2025

1. Corporate ID No. 000849388

2. Name of Corporation MMHC

3. State of Incorporation

State: RI

NAICS CODE

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code

541713

4. Principal Office Address

No. and Street: 166 VALLEY STREET
BUILDING 6M, SUITE 103

City or Town: PROVIDENCE State: RI Zip: 02908 Country: USA

5. Brief Description of the Character of the Affairs Conducted in Rhode Island

TO PROVIDE THERAPEUTIC SERVICES AND HOUSING TO IDIVIDUALS WITH DUAL
DIAGNOSIS PARTICULARLY PTSD AND SUSTANCE ABUSE RESEARCH AND
DEVELOPMENT OF OPTIMAL TREATMENT INTERVENTION

6. Names and Addresses of the Officers and Directors:

All Directors and Officers must be listed individually. The number of DIRECTORS of a Rhode Island Corporation shall not be less than 3.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	PETER LANG	166 VALLEY STREET, BUILDING 6M, SUITE 103 PROVIDENCE, RI 02909 USA
DIRECTOR	ROBERT DUWORS	166 VALLEY STREET PROVIDENCE , RI 02909 USA
DIRECTOR	PETER LAND	166 VALLEY STREET, BUILDING 6M, SUITE 103 PROVIDENCE, RI 02909 USA
DIRECTOR	ROBERT WOLFORD	166 VALLEY STREET, BUILDING 6M, SUITE 103 PROVIDENCE, RI 02909 USA

7. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

NEVILLE BEDFORD 365 EDDY STREET, #303 PROVIDENCE , RI 02903

8. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.

Signed this 9 Day of May, 2025 at 10:13:37 AM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By ROBERT M. DUWORS PH. D.
Signature of Authorized Person

Form No. 631
Revised 09/07

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