	State of Rhode		Fee: \$50.00			
~	Office of the Secret					
	148 W. River S					
1636	Providence RI 029					
Foreign Business Corpora	(401) 222-30	140				
Annual Report						
Filing Period: February 1 - May	1					
In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law						
(R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.						
ANNUAL REPORT YEAR: 2023	3					
1. Corporate ID No. 00010	4190					
2. Name of Corporation Com	munity Therapeutix, P.C.					
3. Street Address Principal B	usiness Office:					
No. and Street: <u>601B BR</u>	DAD STREET					
City or Town: <u>NEW LO</u>	NDON State	e: <u>CT</u> Zip: <u>06320</u>	Country: <u>USA</u>			
4. Business Phone No.						
<u>860-848-9157</u>						
5. State of Incorporation						
State: <u>CT</u>						
ARTICLE III						
Enter the six digit NAICS Code Download the list of codes <u>here</u>	-					
<u>621340</u>						
6. Brief Description of the Cha	aracter of Business Condu	cted in Rhode Island				
PROFESSIONAL OCCUPATIONAL AND PHYSICAL THERAPY SERVICES.						
7. Names and Addresses of the Officers and Directors:						
All officers and directors must be listed.						
Title	Individual Name First, Middle, Last, Suffix		ress State, Zip Code, Country			
ļ,,			'			

PRESIDENT	KATHLEEN STEL		601B BROAD STREET NEW LONDON, CT 06320 USA		
8. Shares Authorized and	Issued				
Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares	Total Issued and Outstanding <i>Num of</i>	
CNP		\$0.0000	Number of Shares 20,000.00	Shares	

9. 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.

Signed this 8 Day of February, 2023 at 2:35:45 PM. *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 corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By SHARON MUELLER

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

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