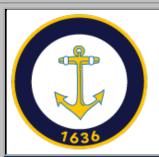
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State of Rhode Island Office of the Secretary of State

No Fee

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

Professional Corporation Annual Report - Amended

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.

This form is only to be used to amend the current annual report on file with this office.

ANNUAL REPORT YEAR: 2023

1. Corporate ID No. 000795209

2. Name of Corporation Karen Gieseke, Ph.D. & Associates Inc.

3. Street Address Principal Business Office:

No. and Street: 42 VALLEY ROAD

SUITE 3C

City or Town: MIDDLETOWN State: RI Zip: 02842 Country: USA

5. State of Incorporation

State: RI

ARTICLE III

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here. More information on NAICS can be found online.

621330

6. Brief Description of the Character of Business Conducted in Rhode Island

COMPREHENSIVE PSYCHOLOGICAL SERVICES FOR ADULTS AND CHILDREN, INCLUDING

ADOLESCENTS. PSYCHOLOGICAL TESTING AND EVALUATIONS

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	KAREN J GIESEKE	42 VALLEY ROAD SUITE 3C MIDDLETOWN, RI 02842 US
OTHER OFFICER	DEBORAH FOPPERT	47 WESTWIND DRIVE JAMESTOWN, RI 02835

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares	Num of
			Number of Shares	Shares
STK		\$0.0100	1,000.00	1000

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 2 Day of March, 2023 at 12:59:40 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 DEBORAH FOPPERT

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

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I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,
hereby certify that this document, duly executed in accordance with the provisions
of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this
office on this day:

March 02, 2023 12:59 PM

Gregg M. Amore Secretary of State

Treg M. Coure

