State of Rhode Island Fee: \$50.00
Office of the Secretary of State
Division Of Business Services 148 W. River Street
Providence RI 02904-2615
1636 (401) 222-3040
Business Corporation
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
1. Corporate ID No. 000110142
2. Name of Corporation WELLSPRING PHYSICAL THERAPY, INC.
3. Street Address Principal Business Office:
No. and Street: <u>58 EAST KILLINGLY ROAD</u>
City or Town:FOSTERState: RIZip: 02825Country: USA
4. Business Phone No.
5. State of Incorporation
State: <u>RI</u>
ARTICLE III
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.
<u>524114</u>
6. Brief Description of the Character of Business Conducted in Rhode Island
TO PROVIDE ADVANCED LEVEL MANUAL THERAPY AND OTHER THERAPEUTIC SERVICES CONGRUENT WITH THE PRACTICE OF PHYSICAL THERAPY.
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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete.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	SUSAN CHARLWOOD					
T REGIDENT	SUSAN CHARLWOOD		55 KILLINGLY ROAD			
				FOSTER, RI 02825 USA		
. Shares Authorized and I	ssued					
Class of Stock			lue Per are	Total Authorized Shares Number of Shares	Total Issued and Outstanding Num of Shares	
CNP	_	\$0.0000		600.00	200	
	1	ψυ.00		000.00	200	
Signed this 17 Day of Ap andividuals signing this inst ander penalties of perjury, and that	trument constitutes th that this instrument is the facts stated herei	e affirmati s that indiv	ion or aci vidual's a	knowledgement of t ct and deed or the d	the signatory act and deed	
ndividuals signing this inst under penalties of perjury,	trument constitutes th that this instrument is the facts stated herei Laws § 7-1.2.	e affirmati s that indiv n are true,	ion or act vidual's a , as of the	knowledgement of t ct and deed or the d	the signatory act and deed	
ndividuals signing this inst under penalties of perjury, of the corporation, and that ompliance with R.I. Gen. 1 By <u>CHERRIE R. PERKIN</u>	trument constitutes th that this instrument is the facts stated herei Laws § 7-1.2.	e affirmati s that indiv n are true,	ion or act vidual's a , as of the	knowledgement of t ct and deed or the d	the signatory act and deed	
ndividuals signing this inst under penalties of perjury, of the corporation, and that compliance with R.I. Gen. By <u>CHERRIE R. PERKIN</u> Signature of Authorize	trument constitutes th that this instrument is the facts stated herei Laws § 7-1.2.	e affirmati s that indiv n are true,	ion or act vidual's a , as of the	knowledgement of t ct and deed or the d	the signatory act and deed	
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ndividuals signing this inst ander penalties of perjury, of the corporation, and that ompliance with R.I. Gen. A By <u>CHERRIE R. PERKIN</u> Signature of Authorize orm No. 630 evised 09/07	trument constitutes th that this instrument is the facts stated herei Laws § 7-1.2.	e affirmati s that indiv n are true,	ion or act vidual's a , as of the	knowledgement of t ct and deed or the d	the signatory act and deed	