

SECRETARY OF THE STATE OF CONNECTICUT

Document Review

30 Trinity Street
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Hartford, CT 06115-0470

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SECRETARY OF THE STATE OF CONNECTICUT

- 1. Name of Corporation: PARTNERSHIPS CENTER FOR ADULT DAY CARE, INC.
- 2. Business ID: 0252091
- 3. Report due in the month of: August, 2019
- 4. This Corporation is: DOMESTIC/NON-STOCK
Fee is: \$50.00
Corporate Name: PARTNERSHIPS CENTER FOR ADULT DAY CARE, INC.
Mailing Address: 3 INDUSTRIAL CIRCLE
HAMDEN,CT 06517

Changes: 3 INDUSTRIAL CIRCLE
HAMDEN,CT 06517 USA

- 5. Principal Office Address (in CT Only): 3 INDUSTRIAL CIRCLE
HAMDEN,CT 06517

Changes: 3 INDUSTRIAL CIRCLE
HAMDEN,CT 06517 USA

- 6. Executive Office Address (Foreign Corps Only):

Changes: _____

- 7. Principal Office in State of Formation (Foreign Corps Only):

Changes: _____

- 8. Attached hereto are the officers and directors of the corporation with their business and residence addresses.

9. Date: 07/18/2019

10. Email Address: partnershipsadc@yahoo.com

- 11. I hereby certify and state, under penalties of false statement, that all of the information set forth on this annual report is true. I hereby electronically sign this report.

Print Capacity: DIRECTOR

Signature: MARY BETH KIELY, RN

1. Full Legal Name: SHIRLEY PRIPSTEIN
 Title(s): PRESIDENT
 Residence Addr: 4 LAKE COURT
 HAMDEN,CT 06517

Business Addr: 999 ASYLUM AVE. FL 3
 HARTFORD,CT 06105

Res Changes: _____

Bus Changes: _____

2. Full Legal Name: GEORGE ALEXANDER
 Title(s): TREASURER
 Residence Addr: 55 GORHAM DRIVE
 HAMDEN,CT 06514

Business Addr: NONE

Res Changes: _____

Bus Changes: _____

3. Full Legal Name: JEAN FOLSOM
 Title(s): SECRETARY
 Residence Addr: 986 WINTERGREEN AVE.
 HAMDEN,CT 06514

Business Addr: 2901 DIXWELL AVE.
 HAMDEN,CT 06518

Res Changes: _____

Bus Changes: _____

4. Full Legal Name:

PATRICIA VENER-SAAVODRA

Title(s):

SECRETARY

Residence Addr:

Business Addr:

Res Changes:

780 RIDGE RD.

HAMDEN,CT 06517 USA

Bus Changes:

3 INDUSTRIAL CIRCLE

HAMDEN,CT 06517 USA