



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov/business

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2013

Filing Period: June 1 - June 30 • This report must be typed or printed legibly.

Filing Fee: \$20.00 • FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 000131034		2. Exact name of the Corporation The Elliot Leadership Institute			
3. State of Incorporation RI		4. Brief description of the character of business conducted in Rhode Island Research and education to promote and improve the quality of leadership in the hospitality and foodservice industries			
5. Principal office address One Cookson Place, 6th Floor		City Providence	State RI	Zip 02903	
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Alice Elliot		Vice-President Name			
Street Address 505 White Plains Road		Street Address			
City Tarrytown	State NY	Zip 10591	City	State	Zip
Secretary Name Kenneth Levy		Treasurer Name Rhonda Levene			
Street Address 8 Abbott Park Lane		Street Address 7702 Legacy Drive			
City Providence	State RI	Zip 02903	City Plano	State TX	Zip 75204
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
Director Name John Bowen		Director Name Curtis Wilson			
Street Address 8 Abbott Park Lane		Street Address 200 Vesey Street			
City Providence	State RI	Zip 02903	City New York	State NY	Zip 10285
Director Name Pat Mulhern		Director Name Joe Cugine			
Street Address 6133 North River Road		Street Address 700 Anderson Hill Road			
City Rosemont	State IL	Zip 60018	City Purchase	State NY 1057	Zip
8. REGISTERED AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 641.					

This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

FILED

JUL 03 2013

File Date _____

Check No _____

By: _____

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer _____ Date _____

Alice Elliot

Print or Type Name of Officer

President

Title of Officer

The Elliot Leadership Institute
Additional Directors

Steve Romaniello	1180 Peachtree Street	Atlanta, GA 30309	USA
Carlton Curtis	1061 Sugar Run	Greensboro, GA 30642	USA
Joleen Goronkin	2408 Victory Park Lane	Dallas, TX 75219	USA

FILED

JUL 03 2013

By *mmc*

JD # 131034