

A. Ralph Mollis, Secretary of Sta Corporations Divisio 148 W. River Stre Providence, RI 02904-261

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 201.2.

Filing Period: June 1 - June 30 • Filing Fee: \$20.00 * THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK

401.222.30-

. Corporate ID No.	2. Name of Corporation								
111759	Burrillville Land Trust								
. State of Incorporation	4. Corporate ada	ress in Rhode Island - Street A	City	Zip					
RI	PO Box 506	3		02830					
Foreign corporation. Enter principal office address			City	State	Zip				
. Brief Description of the chara	ctor of the affairs which	h are actually conducted in Ri	node Island						
			acter of the Town of Burrillvill	e					
NAMES AND ADDRES	SES OF THE OFF	ICERS: ("X" BOX FOR A	TTACHMENT) 🗌 FILL IN SPA	CES BEFORE USING A	TTACHMENTS				
resident Name			Vice President Name						
Paul A. Roselli			Richard Dionne						
treet Address			Street Address	<u>ــ</u> ــا					
65 Maureen Circle			230 Benedict Road		20.				
lity	State	2ip	City	State	2ip				
1apleville	RI	02839	Harrisville	RI	02830				
veretary Name Poris Alberg			Treasurer Name Richard Dionne						
Street Address 665 Maureen Circle			Street Address 230 Benedict Road						
ity	State	Zip	City	State	Zip				
napleville, RI 02839	RI	02839	Harrisville	l _{Rl}	02830				
NAMES AND ADDRE	SES OF THE DIR	ECTORS: C"X" BOX FOR	ATTACHMENT) ☐ FILL IN SP						
			ND) CORPORATION SHALL						
			Director Name		*				
Director Name			Director Name		Vije i voje i i i 222 00000000000000000000000000000				
Paul A. Roselli			Director Name Nancy Ridley		**************************************				
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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 forcin are true find correct.

Signature of Officer

Print or Type Name of Officer