

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615

2008

401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008 401.222.3
Filing Period: June 1 - June 30 • Filing Fee: \$20.00 * THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK
* In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject

to a penatty jee of \$25.00.						
1. Corporate ID No. 27799	2. Name of Corporation	Stillage				
3. State of Incorporation	GASPEE SENIORS 4. Corporate address in Rhode Island - Street Address City Zip				Zip	
	· ^			1 7 /	02888	
RHODE ISLAND	99 POST	10 1-1		Suate CHARWICK	Zip	
5. Foreign corporation. Enter print	cipal office address		City	State	Zip	
	£3 65 111	-# 2 7k- 2- fil-	· · · · · · · · · · · · · · · · · · ·			
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island RECREATIONAL & SOCIAL CLUB FOR SENIORS CITY OF WARWICK						
7. NAMES AND ADDRESSES	OF THE OFFICERS:	("X" BOX FOR ATTACHE	MENT) FILL IN SPACES B	EFORE USING ATTA	CHMENTS	
President Name			Vice President Name			
JEAN PRENDERGAST			CLAIRE B. KIG95			
Street Address 99 POST ROAD FI			Street Address 38 PUDUBON ROAD			
WARWICK	State KI	zip 02888	WARWICK	State PI	02888	
Secretary Name	· · · · · · · · · · · · · · · · · · ·		Treasurer Name	New P		
BEVERLY ST	URDAHL		TERRY COL	ARDO		
		Ë	Street Address 109 HEMLO	CK AVENUE	£	
Street Address 219 CANFIEL City WARWICK	State LI	zip 02889	WARWICK.	State RI	02886	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS						
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23						
Director Name		/	Director Name		,	
HOWARD E	O'BRIE	√	BERNICE	JOHN-5101	<u> </u>	
Street Address			Street Address	1 2 1		
341 SQUAN	TUM DRI	YE	42 PRISCIL	LA MYEN	Œ	
WARWICK	State RI	02888	WARWICK	State RI	02889	
Director Name			Director Name .	(, , _ ,		
MELEN DI	PILEY		LOUISE J	MITH		
Street Address	wood AVE	=NaE	Street Address Button	woods Ar	ENUE	
CHY //ARMICK	State RI	01889	Cary WARWICK	State RI	Z# 02886	
9. REGISTERED AGENT IN	RHODE ISLAND - DO	NOT ALTER - Chang	es require filing of Form 6	41 - R.I.G.L. 7-6-13	/ 7-6-78	
Agent Name	•		Address			
JOAN M. BA	1993					
Address		· · · · · · · · · · · · · · · · · · ·	City .	Zip	000	
	AD C-3		WARWICK	32	.888	
This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee						

	Under penalty of perjury, I declare and affirm that I report, including any accompanying schedules and st	I have examined this atements, and that all
File Date FILED	statements contained hereinare true and correct.	tas
Check No	Significan Of Officer JEAN PRENDER 9AST	Date
By: 335	Prim or Type Name of Officer PRESIDENT	
FOR SECRETARY OF STATE USE ONLY	Tule of Officer	Form 631 Rev. 12/06