



NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008
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 penalty fee of \$25.00.

Permitted by Law

1. Corporate ID No. 92519		2. Name of Corporation R.I. Reform Party State Committee		
3. State of Incorporation R-I.		4. Corporate address in Rhode Island - Street Address 315 Sayles Ave		City PAWTUCKET
				Zip 02860
5. Foreign corporation. Enter principal office address			City	State
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island TO PROMOTE AND SUPPORT QUALIFIED CANDIDATES AND TO GUIDE AND CONTROL ALL R.I. POLITICAL COMMITTEE/CONVENTIONS				
7. NAMES AND ADDRESSES OF THE OFFICERS: (X BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name / CHAIRMAN William M Greenwood		Vice President Name / CHAIRMAN David C. Richardson		
Street Address 315 Sayles Ave		Street Address 71 Steer Rd.		
City PAWTUCKET	State R.I.	Zip 02860	City GLOUSTER	State R.I.
Secretary Name Helen Pisano		Treasurer Name William M Greenwood		
Street Address 92 Kentland Ave.		Street Address 315 Sayles Ave		
City PROVIDENCE	State R-I.	Zip 02904	City PAWTUCKET	State R-I.
8. NAMES AND ADDRESSES OF THE DIRECTORS: (X BOX FOR ATTACHMENT) <input type="checkbox"/> 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 William M Greenwood		Director Name David C. Richardson		
Street Address 315 Sayles Ave		Street Address 71 Steer Rd.		
City PAWTUCKET	State R-I.	Zip 02860	City GLOUSTER	State R-I.
Director Name Helen Pisano		Director Name Doris I Greenwood		
Street Address 92 Kentland Ave		Street Address 315 Sayles Ave Apt. II		
City PROVIDENCE	State R-I.	Zip 02904	City PAWTUCKET	State R-I.
9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78				
Agent Name William M. Greenwood		Address		
Address 315 Sayles Ave		City PAWTUCKET		Zip 02860

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

File Date **FILED**
Check No. JUN 23 2008
By: 1375
FOR SECRETARY OF STATE USE ONLY

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.

William M. Greenwood 6/20/08
Signature of Officer Date

William M. Greenwood
Print or Type Name of Officer

TREASURER
Title of Officer