



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

*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.*

1. Corporate ID No 69852	2. Name of Corporation Bowen's Wharf Merchants Association		
3. State of Incorporation Rhode Island	4. Corporate address in Rhode Island - Street Address 13 Bowen's Wharf		City Newport
5. Foreign corporation. Enter principal office address		City	State Zip 02840
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island To promote and publicize Bowen's Wharf, to encourage the growth and success of the wharf.			

7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Loretta Roy	Vice President Name		
Street Address 6 Bowen's Wharf	Street Address		
City Newport	State RI	Zip 02840	City
Secretary Name Naudia Saulino		Treasurer Name David Fernandez	
Street Address 4 Bowen's Wharf	Street Address 27 Bowen's Wharf		
City Newport	State RI	Zip 02840	City Newport

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 Bartlett S. Dunbar	Director Name David Fernandez		
Street Address 25 Bridge Street	Street Address 27 Bowen's Wharf		
City Newport	State RI	Zip 02840	City Newport
Director Name Loretta Roy	Director Name Naudia Saulino		
Street Address 6 Bowen's Wharf	Street Address 4 Bowen's Wharf		
City Newport	State RI	Zip 02840	City Newport

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 S. M. Hurlburt	Address		
Address 13 Bowen's Wharf	City Newport	State RI	Zip 02840

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



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File Date	FILED	
Check No.	JUN 30 2008	
By:	Rv (244)	
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.

Loretta Roy

Signature of Officer

6/26/08

Date

Loretta Roy

Print or Type Name of Officer

President

Title of Officer