

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street

2008 Providence, RI 02904-2615

## 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.	2. Name of Corporation					
154528	CITIZENS PROGRAMS CORPORATION					
3 State of Incorporation	4. Corporate address in Rh	oode Island - Street Address		City	Ziţı	
MASSACHUSETTS						
5. Foreign corporation. Enter principal office address			City	State	Zip	
88 BALCK FALCON AVENUE SUITE 342			BOSTON	MA	02210	
6. Brief Description of the character o	f the affairs which are ach	ially conducted in Rhode Islan	nd			
PROVIDE SERVICES TO FA	ACILATE THE DELIV	VERY OF HOME HEA	TING OIL TO LOW-INCOME	FAMILIES		
W NAMES AND ADDRESSES	OF THE OFFICERS.	/"V" BOV FOD ATTACHA	GENT) ["] FILL IN SPACES RE	FORE USING ATTACHI	MENTS	
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS  President Name  Vice President Name						
President Name  JOSEPH P. KENNEDY II			PETER F. SMITH COO			
Street Address			Street Address			
88 BLACK FALCON AVENUE SUITE 342			88 BLACK FALCON AVENUE SUITE 342			
City	State	Ζip	City	State	Ζip	
BOSTON	MA	02210	BOSTON	MA	02210	
Secretary Name	Treasurer Name					
Joseph A. Moran III			Joseph A. Moran III			
Street Address			Street Address			
88 BLACK FALCON AVENUE SUITE 342			88 BLACK FALCON AVENUE SUITE 342			
City	State	Ziφ	City	State	Zip	
BOSTON	MA	02210	BOSTON	MA	02210	
			<i>HMENT)</i> FILL IN SPACES BI			
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-2						
Director Name			Director Name			
JOSEPH P. KENNEDY II			PETER F. SMITH			
Street Address			Street Address			
88 BLACK FALCON AVENUE SUITE 342			88 BLACK FALCON AVENUE SUITE 342			
City	State	Zip	City	State	Zip	
BOSTON	MA	02210	BOSTON	MA	02210	
Director Name			Director Name			
ELIZABETH K. KENNED	Υ					
Street Address			Street Address			
88 BLACK FALCON AVE		·	1		22.	
City	State	Zip	City	State	Zip	
BOSTON	MA	02210	I	1		
9. REGISTERED AGENT IN	RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-78						
This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee						
=						

File Date	1-16-09
Check No.	60846
Ву:	mnc
FOR SE	ECRETARY OF STATE USE ONLY

154528

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 Bate
Signature of Officer / Date
JOSEPH A. MORAN III
Print or Type Name of Officer
TREASURER
Title of Officer Form 631 Rev. 09/17

Director Name:

Patrick T. Jones 88 Black Falcon Avenue Suite 342 Boston, MA 02210

**FILED**