



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 2009

**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. <b>123219</b>		2. Name of Corporation <b>MILL COTE CONSERVANCY</b>	
3. State of Incorporation <b>RI</b>		4. Corporate address in Rhode Island - Street Address <b>154 OLD MILL BLVD</b>	
		City <b>WARWICK</b>	Zip <b>02889</b>
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 <b>LAND TRUST - COMMUNITY EDUCATION &amp; IMPROVEMENT</b>			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name <b>WILLIAM DERRIV</b>		Vice President Name	
Street Address <b>84 DUNDAS</b>		Street Address	
City <b>WARWICK</b>	State <b>RI</b>	Zip <b>02889</b>	
Secretary Name <b>LESLIE DERRIV</b>		Treasurer Name <b>LESLIE OH</b>	
Street Address <b>84 DUNDAS AVE</b>		Street Address <b>154 OLD MILL BLVD</b>	
City <b>WARWICK</b>	State <b>RI</b>	Zip <b>02889</b>	
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 <b>THOMAS A. WILSON</b>		Director Name <b>LAURA CONLIN</b>	
Street Address <b>154 OLD MILL BLVD</b>		Street Address <b>10 MILLER AVE</b>	
City <b>WARWICK</b>	State <b>RI</b>	Zip <b>02889</b>	
Director Name <b>MARC PETERSON</b>		Director Name	
Street Address <b>19 STEALING AVE</b>		Street Address	
City <b>WARWICK</b>	State <b>RI</b>	Zip <b>02889</b>	
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	<b>FILED</b>
Check No.	<b>MAR 31 2009</b>
By:	<b>By 1053</b>
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.

Signature of Officer **Leslie Oh** Date  
**LESLIE OH**  
 Print or Type Name of Officer  
**TREASURER**  
 Title of Officer