



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. 27666		2. Name of Corporation Bristol Art Museum			
3. State of Incorporation RI		4. Corporate address in Rhode Island - Street Address Box 42		City Bristol, RI	Zip 02809
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 Art exhibits					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Paulette Carr			Vice President Name David Harrington		
Street Address 151 Ferry Rd.			Street Address 19 Congregational St.		
City Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809
Secretary Name Cathy Holmstrom			Treasurer Name Helga Piccoli		
Street Address 341 Hope St.			Street Address 25 Aaron Ave.		
City Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809
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 Kath Armor			Director Name Ben Bergholtz		
Street Address 48 Seal Island Rd.			Street Address High Street		
City Bristol	State RI	Zip 02809	City Bristol	State RI	Zip 02809
Director Name Patricia Woods			Director Name		
Street Address 133 Poppasquash Rd.			Street Address		
City Bristol	State RI	Zip 02809	City	State	Zip
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

27666

File Date	<u>6-18-09</u>
Check No.	<u>339</u>
By:	<u>MNC</u>
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.

Helga Piccoli 6/14/09
Signature of Officer Date
Helga Piccoli
Print or Type Name of Officer
Treasurer
Title of Officer