



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 02904-2611
401.222.3000

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. 73369 | 2. Name of Corporation Independent Schools Assoc. of RI | | |
| 3. State of Incorporation RI | 4. Corporate address in Rhode Island - Street Address 250 Lloyd Ave | City PROV | Zip 02906 |
| 5. Foreign corporation. Enter principal office address N/A | | City | State RI |

6. Brief Description of the character of the affairs which are actually conducted in Rhode Island

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

| | | | | | |
|--------------------------------------|-------------|--------------|-----------------------------------|-------------|--------------|
| President Name Dominique Thompson | | | Vice President Name Dan Miller | | |
| Street Address 70 John ST | | | Street Address 216 Hope ST | | |
| City PROV. | State RI | Zip 02906 | City PROV | State RI | Zip 02906 |
| Secretary Name MARIE DEL PADRE | | | Treasurer Name RALPH WALES | | |
| Street Address 250 Lloyd Ave | | | Street Address MAXFIELD AVE | | |
| City PROV. | State RI | Zip 02906 | City EAST PROV | State RI | Zip 02914 |

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 GARY DEL NEO | | | Director Name SWAN HABERLAND T | | |
| Street Address 4640 Tower Hill Rd | | | Street Address 660 Waterman Ave | | |
| City Wakefield | State RI | Zip 02879 | City EAST PROV | State RI | Zip 02914 |
| Director Name JESSICA ROBINS MILLER | | | Director Name SISTER MARTHA MULLIGAN | | |
| Street Address 215 Ferris Ave | | | Street Address Wrentham Rd | | |
| City EAST PROV | State RI | Zip 02916 | City Cumberland | State RI | Zip 02864 |

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: 6-19-09
Check No.: 343
By: MRC

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: Marie Del Padre 6/11/09
Print or Type Name of Officer: Marie Del Padre
Title of Officer: Secretary