

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 B.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 115510 Friends of Harmony Village Inc		
3. State of Incorporation 4. Corporate address in Rhode Island - Street Address R	City C t Zip	
5. Foreign corporation. Enter principal office address	City — State RI 2402857	
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island Preserve and support historical and cultural buildings and activities		
IN HAPMONY SECTION OF GOORSTEP. PL. 7. NAMES AND ADDRESSES OF THE OFFICERS: ("" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS		
President Name Elatur Verity	Vice President Name Aluce Mack	
Street Address 11 Edgewood Drive POMOX 168	Strong Address 122 Sawmill Rd	
Harmony State RI 210 02829	Harmony Sum RI 21002829	
Pauline Anderson	Tregulary Name 1 VY9CILLA W. HOLY	
Tog Tourtellot Hill RL	29 Old Quarry Rd	
City No. Scituate State RI 24 02857	No Scitucke State RI 202857	
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 R-M-Stinking. 12	Kathleen Lauton	
Street Address 1991 Sanvinill Rd	Street Address 749 EVANS RA	
Harmony Share RI 210 02829	Chepachet RI 02814	
MEVIN CANANA	Director Name Noice	
Street Agent Bax 381 Sawmill Rol	Street Address	
City Hair mony scare RI Zip 02807	Ciry State Zip	
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		
Priscilla W. Holt	Address	
29 Old Quarry Rd	No. Scituate RI 240 02857	
This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee		

File Date FILED
Check No. JUN 2 6 2009
By: By 227
FOR SECRETARY OF STATE USE ONLY

Under penalty or perjury, I declare and affirm that I	
report, including any accompanying schedules and sta	tements, and that all
statements contained herein are true and correct.	
Priscella W. Halt	6-24-09
Signature of Officer	Date
Priscille W. Holt	
Print or Type Name of Officer	
Treasurer	
Title of Officer	