

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
401.

Filing Periodic 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. 27913	2 Name of Corporation Glocester	Manton	Free Public Libr	ary of Gloces	her. R.I.
3. State of Incorporation Rhode Island	1. Corporate address in R	hode Island - Street Add	tress	Chepachet	Zip
5. Foreign corporation. Enter prin	wipal office address		CR <sub>T</sub> :	State	Ziji
6. Brief Description of the character	of the affairs which are act	ually conducted in Rhod	le Island	<b>_</b>	<u> </u>
NAMES AND ADDRESSES	C OF THE OPPICED				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATT. President Name Kathy Winsor			Vice President Name		
Street Address 169 Douglas Hook Rd			Street Address 1241 Putnam Pike		
Chepachet	State R1	02814	Chepachet	State R\	02814
Secretary Rame Cynthia Chace			Treasurer Name Susan Gome		
Street Address 54 Choomist Hill Rd			Street Address PO Box 410		
Chepachet 8. NAMES AND ADDRESSES	R\ S OF THE DIRECTOR	Zip   <b>O.28 4</b>  S: ("X" BOX FOR AT	Chepachet TACHMENT MEILL IN SPACES	State R1 S BEFORE USING ATTACE	211 <b>02814</b> MENTS
THE NUMBER OF DIRECTOR Director Name She			Director Name    CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23   Director Name		
Street Address 1733 Snake Hill Rd			Douglas Hook Rol		
Chepachet	State	<b>の</b> ると14	Chepachet	State R I	<i>⊘</i> 2814
Director Name			Director Name -David Knudsen		
Street Address 25 Douglas Hook Rd			Street Address 2548 Putnam Pile		
Chepachet 9. REGISTERED AGENT IN	RHODE ISLAND	0 <b>281</b> 4	Chepachet	State R I	D2814
This information is currently	of record in the Office	of the Secretary of S	State. Changes require filing of Fo	orm 641 - R.I.G.L. 7-6-13/7-	6-78
This report must	be signed by either t	he President, Vice f	President, Secretary, Assistant S	ecretary, Treasurer, Receiv	er or Trustee

	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all
File Date 6-30-09	statements contained herein are true and correct.  Sussay Jorre  Signature of Officer  Date
Check No. 6335	Signature of Officer Corrie  Susan Gorrie
By: MMC	Print or Type Name of Officer
FOR SECRETARY OF STATE USE ONLY	Title of Officer Form 631 Rev. 09/17

Non-Profit Corporation Annual Report for the Year 2009

Attachment for Directors

Corporate ID No. 27913

Entity Name: Glocester Manton Free Public Library of Glocester, Rhode

**Island** 

Director: Donna Laramee

2016 Putnam Pike Chepachet, RI 02814

FILED

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