RI SOS Filing Number: 200947991520 Date: 07/03/2009 4:00 PM

Office of the Secretary of State

Providence, RI 02904-2615
401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR '09

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.	2. Name of Corporation		
58253	BLUE MITTEN INC ENTITY ID 58253		
3. State of Incorporation: RI	4. Corporate address in Rhode Island - Street Address: 86 MAIN ST	City: WESTERLY	Zip: 02891
5. Foreign corporation. Enter principal office address: N.A.	City	State	Zip

6. Brief Description of the character of the affairs which are actually conducted in Rhode Island:
ACCEPTANCE OF DONATED CLOTHING & FURNITURE FOR RESALE AT PRICES WHICH ACCOMODATE THE ABILITY TO PAY OF LOCAL LOW INCOME FAMILIES.

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

President Name: JANET KITCHEN	Vice President Name: MAC RICHARDSON
Street Address: 24 CLARK ST	Street Address: 500 CAROLINA BACK ROAD
City: WESTERLY State: RI Zip: 02891	City: CHARLESTOWN State: RI Zip: 02813
Secretary Name: SHIRLEY ANDREWS	Treasurer Name: AUSTIN MURPHY
Street Address: 256 ANGOILLA RD	Street Address: 69 VERDI RD
City: PAWCATUCK State: CT. Zip: 06379	City: WESTERLY State: RI Zip: 02891

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: LEON MILLS	Director Name: MARION PALM
Street Address: 190 SHANNOCK VILLAGE RD	Street Address: 15 KNOWLES AV
City: RICHMOND State: RI Zip: 02875	City: WESTERLY State: RI Zip: 02891
Director Name: JOE TURINO	Director Name: B.J. GAYNOR
Street Address: 73 FOUR NINEGEET RD	Street Address: 8 MARGIN ST
City: CHARLESTOWN State: RI Zip: 02813	City: WESTERLY State: RI Zip: 02891

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

[redacted]

File Date: FILED
Check No.: JUL 0 3 2009
By: By
FOR SECRETARY OF STATE USE ONLY

[redacted]

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 — Date: 6/30/09

J. AUSTIN MURPHY
Print or Type Name of Officer

TREASURER
Title of Officer

Form 631 Rev. 09/17

35704-8-397758