

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

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

penally see of \$25.00.								
1. Corporate ID No.	The Popular Theater of Rhode Island INC.							
3 State of Incorporation Rhode Island	4. Corporate address in R	bode Island - Street Address Ffield Ave		Rutucket	02860			
5. Foreign corporation. Enter principal office address			City	State	Zip			
6. Bird Description of the character of the affairs which are actually conducted in Rhode Island Promoting the Performing and Fine Arts								
7. NAMES AND ADDRESSES OF THE OFFICERS: (**\frac{1}{2}* BOX FOR ATTACHMENT)								
President Name Bauny Manshall			Carole Marshall					
Sireel Address 107 Sheffleld Ave			Street Address 10 7 Sheffiple Aug					
ciip autucke t		02860	CHIP Paw Terret	State RI	2ip 07860			
Secretary Name Paul Scharf			Treasurer Name HR PRN CORING CORN					
Street Address 108 Fort St			Street Address 55 Alchama Ave					
CRANSTON	State RI	2ip 02905	CONCRANS TON	State RI	02905			
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 <u>SHALL NOT BE LESS THAN THREE</u> (3). R.I.G.L. 7-6-23								
Nicholas TROTH Long			Director Name Kathlern Scharf					
Street Address Taylor's LANE			Street Address Sheffield Ave					
		<sup>Zip</sup> 02806	CRANSTON	State RI	02860			
Director Name, 18894 Davis			Director Name					
175 FREELINGN DKWY			Street Address					
PROVIDENCE		02906	Сиу	Siate	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

			Under penalty of perjury, l declare and affirm that report, including any accompanying schedules and	
File Date FILED			statements contained herein are true and correct.	7/22/09
Check No. JUL 2 2 2009		2003	Signalure of Officer & Marshall	Date
FOR SECRETARY OF STATE USE ONLY	VIO SHOIT	CCULTUS SECULTUS	Print or Type Name of Officer  PRS, JRNT  Title of Officer	
	( 03A)	338	Time by Officer	Form 631 Rev. 09/17