

A. Ralph Mollis, Secretary of State Corporations Division

148 W. River Street

Brovidence, RI 02904-2615 401,222,3040

## NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR O

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.	3-94, each corporation ju	ung or rejusing to jut us	unnuut report within the time prese		
1. Corporate ID No.	2. Name of Corporation		, c A		1
31195	RHODE ISL	AND WOMEN	's GOLF ASSOC	IATION	
	4. Corporate address in Rb	ode Island - Street Address		Cny	2φ 0.2879
RHOE ISLAND	137 KEr	JYON AVEN	10E	WAKEFIELD	
5. Foreign corporation. Enter prince	ipal office address		City	State	Ζip
6. Brief Description of the character o	f the affairs which are actu	ally conducted in Rhode Isla	nd		
<b>V</b>					
7 NAMES AND ADDRESSES	OF THE OFFICERS:	("X" BOX FOR ATTACH!	MENT)   FILL IN SPACES BI	EFORE USING ATTACH	MENTS
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT)  FILL IN SPACES BEFORE USING ATTACHMENTS  President Name  Vice President Name					_
JAN FREEBORN			GALE HA	NNA	
Street Address			Street Address		,
22 EAGLE DRIVE			9 HANN		:
City	State	Zip	City	State RI	02857
NO. KINGSTOWN	RI	02852	NO. SCITUATE	1 7 2	02001
Secretary Name			Treasurer Name ASSINTA	G. POULO-	<del>,</del> -
	VIS			G. 100 FIG	<u> </u>
Street Address 26 LARCHWOOD DRIVE			Street Address / KENYON AVENUE		
City	State	Zip () () ()	City	State 77	02879
RUMFORD	RI	02916	WAREFIELD		·
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			GALE HANNA		
JAN FREEBORN			Street Address		
Street Address  22 EAGLE	DRIVE		9 HANNI	A LANE	
City 1	State RI	02152	NO. SOITUATE	State R L	12 A S 57
M. KINGSTOWN		100000	Director Name	1 // 0	35
JUDY DA	VIS		ASSUNTA	G. Poulio	r 😤 矣 👸
Street Address	· · · · · · · · · · · · · · · · · · ·		Street Address	ad A to	- 9 XXX
26 LARCH	-WOOD D	RIVE		ON AVENU	2/6
RUMFORD	State RI	02916	WAREFIELD	State RI	₹2-879
9. REGISTERED AGENT IN RHODE ISLAND					
This information is currently	of record in the Office	of the Secretary of Stat	e. Changes require filing of Form	m 641 - R.I.G.L. 7-6-13/7	478 P 20
This report must	t be signed by either t	he President, Vice Pres	sident, Secretary, Assistant Sec	cretary, Treasurer, Receiv	ver or Trustee

	FILED
File Date Check No.	AUG 04 2009
Ву:	By <u>8</u> シュ3

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.
assente D. Soulist 7/81/09
Signature of Officer / Daté
ASSUNTA G. POULIOT
Print or Type Name of Officer
TREASURER
Title of Officer
Form 631 Rev. 09/17