

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 2006
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. 0 00096591	2. Name of Corporation	INGE CHAPE				
3. State of Incorporation	4. Corporate address in	Rhode Island - Street Address NEXUEEK	HILL RD	wyomine	01898	
5. Foreign corporation. Enter pri	incipal office address	•	City	State	2ір	
6. Brief Description of the characte		ctually conducted in Rhode Isl	and			
7. NAMES AND ADDRESSI President Name Key. Hen	00	odleton	MENT) TILL IN Vice President Name	SPACES BEFORE USING ATTA	CHMENTS	
Street Address Gardine	=RRJ. L	at #41	Street Address		·	
W. Kingston	State R.I.	(D) 2892	City	State	Zip	
Secretary Name			Treasurer Name	n Phillips		
Street Address			Street Address 807 W	lain St. Ppt.	84	
City	State	Zip	Hope Vo	elley State R.I.	^{Zip} 02%32	
				SPACES BEFORE USING ATTA ALL NOT BE LESS THAN THR		
Director Name DAVID My HILL			MICKEAL PENDLETON			
Street Address 107 QHVMCH	ST. POBOX	147	Street Address PIERLA	E 5T. 4		
City PKKDFORD Director Name	State R1	24 0280g	WESTERL	State I.	02891	
ROBERT KE	NYON		Director Name			
Street Address VESTERLY R.I.			Street Address			
City	State	Zip	City	State	Zip	
9. REGISTERED AGENT IN	RHODE ISLAND	• .		ı	1	
This information is currently	of record in the Offic	e of the Secretary of Stat	e. Changes require fil	ling of Form 641 - R.I.G.L. 7-6-1	3/7-6-78	
This report mu:	st be signed by either	the President, Vice Pres	sident, Secretary, As	sistant Secretary, Treasurer, Rec	ceiver or Trustee	

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	By (m)	Under penalty of perjury, I declare and affirm the report, including any accompanying schedules and statements contained herein are true and correct.	
File Date	_(\) 29~76767	Henry R. Pendleton	
Check No.	†	Signature of Officer HENRY R. PENDLETO	Date Description
Ву:		Print or Type Name of Officer	
FOR SECRETARY OF STATE USE ONLY		Title of Officer	
			Form 631 Rev. 09/17