

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

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.	•		<b>,</b>	. , , , , , , , , , , , , , , , , , , ,		
1 Corporate ID No	2 Name of Corp.	2 Name of Corporation				
27912	Literacy Vo	Literacy Volunteers of Rhode Island				
3 State of Incorporation	4 Corporate add	dress in Rhode Island - Street a	Address	City	Zip	
Rhode Island	C/O John 7	leixeira, 55 Dorrance	St. 5th Flr	Providence	02903	
5 Foreign corporation. Enter principal office address			City	State	Ζip	
N/A			N/A	N/A	N/A	
Promoting adult literac	у	b are actually conducted in Ri	bode island  TTACHMENT)   FILL IN SPACE	CC DEEADE HOIMA ATTA	CUMENTS	
President Name		TICKES! ( A DON FOR A	Vice President Name	es before coing at th	CHMENIS	
Kristen O'Grady			None			
Street Address	· · · · · · · · · · · · · · · · · · ·		Street Address			
216 Eighth Street			None			
City	State	Zip	City	State	Zip	
Providence	RI	02906	None	None	None	
Secretary Name Antonio Teixeira			Treasurer Name John Teixeira			
Street Address 1 Monti Circle			Street Address 8 Plantation Drive			
City	State	Zip	City	State	Zip	
Johnston	RI	02919	Cumberland	RI	02864	
8. NAMES AND ADDRE	ESSES OF THE DIR	ECTORS: ("X" BOX FOR	ATTACHMENT) TILL IN SPAC	ES BEFORE USING ATTA	ACHMENTS	
THE NUMBER OF DIR Director Name	ECTORS OF A DO	MESTIC (RHODE ISLA	ND) CORPORATION SHALL N Director Name	OT BE LESS THAN THR	<u>EEE (3)</u> . R.I.G.L. 7-6-23	
James B. Kirkpatrick			Elizabeth Galligan			
Street Address			Street Address:			
70 Jefferson Blvd			1240 Pawtucket Avenue			
City	State	Zip	City·	State	Zip	
Warwick	RI	02888	East Providence	RI	02904	
Director Name James Prescott			Director Name			
Street Address 2 Charles Street			Street Address			
City	State	Zip	City	State	Zip	
Providence	RI	02904	1			
9. REGISTERED AGENT	,	•		•	1	
This information is curre	ently of record in the	e Office of the Secretary of	of State. Changes require filing of	Form 641 - R.I.G L. 7-6-1	3/7-6-78	
This report	must be signed by	either the President, Vic	e President, Secretary, Assistant	Secretary, Treasurer, Rec	ceiver or Trustee	

	27912	Under penalty of perjury, I declare and affirm that I have examined this			
	report, including any accompanying schedules and statements contained herein are true and correct.				
File Date	FILED	Signature of Officer Park Pale Signature of Officer Pale SZ SZ WW ZZ des SZ			
Вуг	SEP <b>2.2</b> 2009	Print or Type Name of Officer			
FOR	SECULTARY OF STATE USE ONLY	TREASURER  Title of Officer  Form 631 Rev. 09/17			