State of Rhode Island
and Providence Plantations
Office of the Secretary of State

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.*

1. Corporate ID No.	2. Name of Corporation		
143770	The Pokanoket Non Profit Community Development		
3. State of Incorporation	4. Corporate address in Rhode Island - Street Address	City	Zip
R.I.	400 Metacom Ave	Bristol	02809
5. **Foreign corporation.** Enter principal office address	City	State	Zip
	Bristol	R.I	0

6. Brief Description of the character of the affairs which are actually conducted in Rhode Island

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

President Name			Vice President Name		
Eric Briggs			William O Guy		
Street Address			Street Address		
602 Delano Road			43 Fales Ave		
City	State	Zip	City	State	Zip
Marion	Ma	02738-1277	Barrington	R.I	02806
Secretary Name			**Treasurer Name**		
Joan Bonner			Kristine ~~Bonner~~ Thomas		
Street Address			Street Address		
			39 Noyes Street		
City	State	Zip	City	State	Zip
			Warwick	RI	02886

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			Director Name		
Lisa Reels			Kristine Thomas		
Street Address			Street Address		
458 Public Street			39 Noyes Street		
City	State	Zip	City	State	Zip
Providence	R.I	02907	Warwick	R I	02886
Director Name			Director Name		
William O. Guy					
Street Address			Street Address		
43 Fales Ave					
City	State	Zip	City	State	Zip
Barrington	R I	02806			

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

FILED
DEC 22 2009
By MD

[redacted]

29-106723

[redacted]

File Date _____
Check No. _____
By: _____
FOR SECRETARY OF STATE USE ONLY

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.

William O Guy 12/22/09
Signature of Officer *Date*

William O. Guy
Print or Type Name of Officer

Director
Title of Officer

Form 631 Rev. 09/17