

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 2010

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 Corp | 2. Name of Corporation | | | | |
| 30241 | The Towns | The Townsend Aid for the Aged | | | | |
| 3. State of Incorporation | 4. Corporate ade | dress in Rhode Island - Street 2 | Address | Сиу | Zip | |
| RI | 2829 East | Main Road | | Portsmouth | 02871 | |
| 5. Foreign corporation. Enter principal office address | | | City | State | Zip | |
| 6. Brief Description of the ch | paracter of the affairs whic | b are actually conducted in Ri | oode Island | | | |
| To give financial aid t | to worthy persons ov | er 60 years of age who | need assistance rather than | support. | | |
| 7. NAMES AND ADDI | RESSES OF THE OF | FICERS: ("X" BOX FOR A | TTACHMENT) 🔲 FILL IN SPA | CES BEFORE USING ATTA | CHMENTS | |
| President Name | | | Vice President Name | | | |
| Caroline Kaull | | | Nancy Allan | | | |
| Street Address 43 Benedict Avenue | | | Street Address 1 Vanderbilt Avenue | | | |
| Cltv | State | Zip | City | State | Zip | |
| Portsmouth | RI | 02871 | Newport | RI | 02840 | |
| Secretary Name | | | Treasurer Name | | | |
| Margaret Stapleton | | | Gina Rymer | | | |
| Street Address 104 River Run Road | | | Street Address 49 Willow Lanee | | | |
| City: | State | Zip | City | State | Zip | |
| Middletown | RI | 02842 | Portsmouth | RI | 02871 | |
| 8. NAMES AND ADDI | RESSES OF THE DIR | ECTORS: ("X" BOX FOR | ATTACHMENT) TFILL IN SPA | ACES BEFORE USING ATTA | ACHMENTS | |
| THE NUMBER OF DI | RECTORS OF A DO | MESTIC (RHODE ISLA | ND) CORPORATION <u>SHALL</u> | NOT BE LESS THAN THE | <u>REE</u> (3). R.I.G.L, 7-6-23 | |
| Director Name | | | Director Name | | | |
| Norey Cullen | | | Mary Martland | | | |
| Street Address | | | Street Address | | | |
| 11 Redwood Street | | | 44 Berroth Court | | | |
| City | State | Zip | City | State | Zip | |
| Newport | RI | 02840 | Portsmouth | RI | 02871 | |
| Director Name Judith Hoogendoorn | | | Director Name Barbara McCurdy | | | |
| Street Address 5 Winthrop Drive | | | Street Address 195 King Charles Drive | | | |
| City | State | Ζip | City | State | Zip | |
| Middletown 9. REGISTERED AGE | RI NT IN RHODE ISLA | 02842 | Portsmouth | RI | 02871 | |
| | | | of State. Changes require filing | of Form 641 - R.I.G.L. 7-6-1 | 3/7-6-78 | |
| This repo | rt must be signed by | either the President, Vic | e President, Secretary, Assista | ant Secretary, Treasurer, Re | ceiver or Trustee | |

| 30 2112D | Under penalty of perjury, 1 declare and affirm that 1 have examined this report, including any accompanying schedules and statements, and that all |
|---------------------------------|--|
| File Date MAY 1 0 2010 | statements contained herein are true and correct. |
| Check No | Signature of Officer Gina Rymer Print or Type Name of Officer |
| FOR SECRETARY OF STATE USE ONLY | Treasurer Title of Officer Form 621 Page 00012 |

The Townsend Aid for the Aged

Corporate ID: 30241

2010 Annual Report

Continuance of Directors:

Vance Gatchel 46 Division Street Newport, RI 02840

Jo Anne Dunlap 452 Mitchells Lane Middletown, RI 02842

Donna Nolan 46 Harrington Avenue Portsmouth, RI 02871

Janet Palmer 13 Summer Street Newport, RI 02840 Norma Greene 1117 Capella South Newport, RI 02840

Susan Kelchner 100 Robin Road Portsmouth, RI 02871

Mary Lou Chase 54 Valley Lane Portsmouth, RI 02871

Jamie Rae Carlson 56 Eustis Avenue Newport, RI 02840

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