



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

A. Ralph Molis, 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.<br>30610                                                                                                                                      |                                                                           | 2. Name of Corporation<br>RHODE ISLAND PHILATELIC SOCIETY |                                    |
| 3. State of Incorporation<br>RI                                                                                                                                   | 4. Corporate address in Rhode Island - Street Address<br>51 FLETCHER ROAD |                                                           | City NK Zip 02852                  |
| 5. Foreign corporation. Enter principal office address<br>N/A                                                                                                     |                                                                           | City                                                      | State Zip                          |
| 6. Brief Description of the character of the affairs which are actually conducted in Rhode Island<br>MEETINGS OF STAMP COLLECTORS, SPEAKERS, EXCHANGES & EXHIBITS |                                                                           |                                                           |                                    |
| 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS                                 |                                                                           |                                                           |                                    |
| President Name<br>MICHAEL INBRUGLIA                                                                                                                               |                                                                           | Vice President Name<br>LOUIS MCGOWAN                      |                                    |
| Street Address<br>25 BRIARCLIFF ROAD                                                                                                                              |                                                                           | Street Address<br>111 MODENA AVE.                         |                                    |
| City<br>CRANSTON                                                                                                                                                  | State<br>RI                                                               | Zip<br>02910                                              | City<br>PROV. State RI Zip 02908   |
| Secretary Name<br>SHAWN PEASE                                                                                                                                     |                                                                           | Treasurer Name<br>PETER K. BERTSCH                        |                                    |
| Street Address<br>47 WYNNE ST.                                                                                                                                    |                                                                           | Street Address<br>51 FLETCHER ROAD                        |                                    |
| City<br>SEEKONK                                                                                                                                                   | State<br>MA                                                               | Zip<br>02771                                              | City<br>NK State RI Zip 02852      |
| 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 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<br>IVAR GUSTAFSON                                                                                                                                   |                                                                           | Director Name<br>BRUCE MACNEIL                            |                                    |
| Street Address<br>56 PERENNIAL DR.                                                                                                                                |                                                                           | Street Address<br>1 GRIFFIN DRIVE                         |                                    |
| City<br>CRANSTON                                                                                                                                                  | State<br>RI                                                               | Zip<br>02920                                              | City<br>WARWICK State RI Zip 02886 |
| Director Name<br>DENNIS E. STARK                                                                                                                                  |                                                                           | Director Name                                             |                                    |
| Street Address<br>19 KENILWORTH WAY                                                                                                                               |                                                                           | Street Address                                            |                                    |
| City<br>PAWTUCKET                                                                                                                                                 | State<br>RI                                                               | Zip<br>02860                                              | City State Zip                     |
| 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**

MAY 26 2010

File Date

Check No.

BY 1389

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.

Signature of Officer

Date

Peter K. Bertsch 05-25-2010  
PETER K. BERTSCH

Print or Type Name of Officer

TREASURER

Title of Officer