



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 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. <del>302000000</del> 30280		2. Name of Corporation ROGER WILLIAMS GENERAL HOSPITAL NURSES ALUMNAE			
3. State of Incorporation RI		4. Corporate address in Rhode Island - Street Address 111 CENTRAL PIKE		City FOSTER	Zip 02825
5. Foreign corporation. Enter principal office address <del>RI</del>		City		State	Zip
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island PROFESSIONAL AND EDUCATIONAL ADVANCEMENT OF MEMBERS AND NURSING IN GENERAL					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name CAROL McVEY			Vice President Name CAROLYN DICK		
Street Address 115 LYNDEN RD			Street Address 34 ROGER WILLIAMS DR.		
City CRANSTON	State RI	Zip 02905	City GREENVILLE	State RI	Zip 02828-2632
Secretary Name PATRICIA BRADLEY			Treasurer Name MARY K THOMAN		
Street Address 96 SLEEPY HOLLOW DR			Street Address 111 CENTRAL PIKE		
City CUMBERLAND	State RI	Zip 02864	City FOSTER	State RI	Zip 02825
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 PAULINE ANDERSON			Director Name EDNA GREENE		
Street Address 759 TOURTELOT HILL RD			Street Address 1 LISA LANE		
City N. SCITUATE	State RI	Zip 02857	City BRISTOL	State RI	Zip 02809
Director Name DOROTHY PETRARCA			Director Name		
Street Address 27 CIRCLE DR			Street Address		
City COVENTRY	State RI	Zip 02816	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 392
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 Mary K Thoman Date 5/24/10  
Print or Type Name of Officer MARY K THOMAN  
Title of Officer TREASURER