

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

permity jee 01 \$25.00.		- 4	1	escribed by min (R.I.G.L. /	-0-91) is subject to a	
1. Corporate 1D No.	2. Name of Corporation					
59435	Chariho As	Chariho Association of Educational Support Personnel				
3. State of Incorporation	4. Corporate address in	Rhode Island - Street Address	Educational Sur	pport Personn 1 <i>Cit</i> y	<u>el</u>	
Rhode Island	453 Switc	h Rđ		17	Zip	
5. Foreign corporation. Enter principal office address			City	Wood River J	dt 02894	
				Jame	Zip	
6. Brief Description of the character	of the affairs which are ac	tually conducted in Rhode Isl	land Tio		,	
members and to	create good	Will between	n of the promote se	:If improveme	nt for	
members of the	S of the officers	("X" BOX FOR ATTACH	TO promote sen educational su	pport person	nel and	
members of their Community President Name MaryBeth Gibbons			Vice President Name Walter Capizzano			
Street Address PO Box 485			Street Address 324 Switch Rd			
City	State	Zip	City	State		
Charlestown	RI	02813	Hope Valley	RI	^{Zip} 02832	
Secretary Name			Treasurer Name	T	02832	
Linda Crossen			Karen Mott			
Street Address	_		Street Address			
City 31 Job			69 Fenner Hill Rd			
·	State	Zip	City	State	Zip	
lest Kingston 8. NAMES AND ADDRESSES	RI OF THE DIRECTOR	02892 \$: (*x* box for attac	Hope Valley HMENT)∏ FILL IN SPACES B	RI	02832	
THE NUMBER OF DIRECTO	ORS OF A DOMESTIC	(RHODE ISLAND)	OPPOPATION SHALL NOT	EFORE USING ATTACE	IMENTS	
Director Name MaryBeth Gibbons			CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23 Director Name Walter Capizzano			
Street Address DO BOY	10E					
FO BOX 485			Street Address 324 Switch Rd			
City	State	Ζip	City	State	776	
<u>Charlestown</u>	RI	02813	W Hope Valley		Zip	
Director Name			Director Name	L RT	L 02832	
Street Address			Street Address 60 Page			
City			Street Address 69 Fenner	HILL Rd		
,		Ζip	City Hope Valley	State RI	^{Zip} 02832	
. REGISTERED AGENT IN R	HODE ISLAND			1	02002	
	N	MARYBeth Gible of the Secretary of State.	OONS Changes require filing of Form	641 PICL 77 127	(TO	
This report must b	ne signed by either th	Descident Vi .	lent Secretory Assistant S.	OTI - K.I.U.L. /-0-13//-(o-/8	
vepore must c	~ organou by citaler in	rresident Vice Press	lent Segratory Assists of			

eport must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

File Date FILED	
Check No. JUN 0 3 2010	
By JOS T	

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all

Karen Trush	2-1-50
Signature of Officer	Date
Karen mott	
Print or Type Name of Officer	

Title of Officer