

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2010

401.222.3040

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.

| penalty see of \$25.00. | | | | • | | |
|--------------------------------------------------------|---------------------------|----------------------------------------------|-----------------------------------|-------------------------------|------------------------|--|
| 1. Corporate ID No. | 2. Name of Cor | • | | | | |
| 27054 | Jamestowi | Jamestown Senior Citizen's Association, Inc. | | | | |
| 3. State of Incorporation | 4. Corporate ac | ldress in Rhode Island - Street Add | ress | City | Zip | |
| Rhode Island | 6 West St | | | Jamestown | 02835 | |
| 5. Foreign corporation. Enter principal office address | | | City | State | Zip | |
| not applicable | | | NA | NA NA | NA | |
| 6. Brief Description of the char | racter of the affairs whi | ich are actually conducted in Rhod | e Island | | | |
| | | | | | | |
| - | | | | | | |
| 7. NAMES AND ADDRE | SSES OF THE OF | FICERS: ("X" BOX FOR ATTA | I <i>CHMENT)</i> 🔲 FILL IN SPA | CES BEFORE USING ATTA | CHMENTS | |
| President Name | | | Vice President Name | | | |
| Charlotte, S. Richard | ison | | Vernon Stromberg | | | |
| Street Address | | | Street Address | | | |
| 165 Hamilton Ave | | | 8 Hull St | | | |
| City | State | Zφ | City | State | Zip | |
| Jamestown | RI | 02835-1280 | Jamestown | RI | 02835 | |
| Secretary Name | | | Treasurer Name | | | |
| Frances Mackabee | | | Josephine Rafanelli | | | |
| Street Address | 407 | | Street Address | | | |
| 21 Pemberton Ave #107 | | | 20 Dory St | | | |
| City | State | Ζφ | City | State | Zip | |
| Jamestown |]RI | 028358 | Jamestown | i Ri | 02835 | |
| 8. NAMES AND ADDRE | SSES OF THE DI | RECTORS: ("X" BOX FOR AT | <i>TACHMENT</i>) [] FILL IN SPA | ACES BEFORE USING ATTA | ACHMENTS | |
| THE NUMBER OF DIR | ECTORS OF A DO | MESTIC (RHODE ISLAND |) CORPORATION SHALL | NOT BE LESS THAN THR | EE (3). R.I.G.L. 7-6-2 | |
| Director Name | | | Director Name | | | |
| Jean Esposito | | | Walter Boll | | | |
| Street Address | | | Street Address | | | |
| 1 Umiak Av | | | 33 Clinton Ave | | | |
| City | State | Zip | City | State | Zip | |
| Jamestown | RI | 02835 | Jamestown | RI | 02835** | |
| Director Name | | | Director Name | | 102000 | |
| Marion Sheehan | | | İ | | | |
| Street Address | | | Street Address | | | |
| 53 Cole St | | | | | | |
| City | State | Zip | City | State | Zip | |
| Jamestown | RI | 02835 | | | | |
| 9. REGISTERED AGENT | IN RHODE ISLA | ND | | • | 1 | |
| This information is | .4. 6 | 0.00 | | | | |
| this information is currer | nuy or record in the | e Office of the Secretary of S | tate. Changes require filing of | of Form 641 - R.I.G.L. 7-6-1: | 3/7-6-78 | |
| This report t | nust be signed by | either the President, Vice P | resident Secretary Assista | nt Sagratarii Transvess D | naissa Tt | |
| , | - 5 | | consent, occiding, Assista | in occidiary, rieasurer, Rec | civer or irustee | |
| | | | | | | |

| File Date FILED | |
|---------------------------------|-------------|
| Check No. JUN 0 6 2010, | |
| By: By Poly | |
| FOR SECRETARY OF STATE USE ONLY | |

27054

| Under penalty of perjury, I declare and affirm report, including any accompanying schedules statements contained herein are true and correct than to the statements. | and statements, and that all |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|
| Signature of Officer | Date |
| Charlotte S. Richardson | |
| Print or Type Name of Officer | |
| President | |
| Title of Officer | |