



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

Fee: \$20.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Non-Profit Corporation
Annual Report**

Filing Period: June 1 - June 30

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.

ANNUAL REPORT YEAR: 2010

1. Corporate ID No. 000027720

2. Name of Corporation Friends of the Memorial and Library Association of Westerly

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 44 BROAD STREET

City or Town: WESTERLY

State: RI

Zip: 02891 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

TO PROMOTE AND SUPPORT THE WESTERLY PUBLIC LIBRARY

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	JUDY TOSCANO	51 JOHN STREET WESTERLY, RI 02891 USA
TREASURER	LOUISE SHARPE	PO BOX 1504 WESTERLY, RI 02891 USA
SECRETARY	ROBERT BENSON	3 GEORGE ST WESTERLY, RI 02891 USA
VICE PRESIDENT	JANE GENCARELLI	18 TIMOTHY DRIVE WATCH HILL, RI 02891 USA
DIRECTOR	MARGUERITE LONG	66 ELM ST WESTERLY, RI 02891 USA
DIRECTOR	ERIN CALL	44 CROSS ST WESTERLY, RI 02891 USA
DIRECTOR	VERA IIAMS	20 NORTH ANGUILLA ROAD PAWCATUCK, CT 06379 USA

8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

FREDERICK C. ECKEL, JR. 41 GROVE AVENUE P.O. BOX 153 WESTERLY , RI 02891

9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver, or Trustee.

Signed this 3 Day of August, 2010 at 8:58:26 AM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By LOUISE SHAPRE

Signature of Officer of the Corporation

☐ President or ☐ Vice President or ☐ Secretary or ☐ Assistant Secretary or

☒ Treasurer or ☐ Receiver or ☐ Trustee (check one)

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in Section 7.

Form No. 631
Revised 09/07

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