



**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. 000028125

2. Name of Corporation CAMP RUGGLES, INC.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: PO BOX 353
City or Town: CHEPACHET State: RI Zip: 02814 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

DAY CAMP FOR EMOTIONALLY HANDICAPPED CHILDREN

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	EDWARD M QUEENAN	1300 HIGHLAND CORP. DR. #203 CUMBERLAND, RI 02864 USA
TREASURER	ROBERT TYLER	66 SOUTH MAIN STREET PROVIDENCE, RI 02903 USA
SECRETARY	PAUL A. SILVER	1500 FLEET CENTER PROVIDENCE, RI 02903 USA
DIRECTOR	NAN LEVINE	197 SLATER AVENUE PROVIDENCE, RI 02906 USA
DIRECTOR	MARY ANN ALTRUI	75 MERIDIAN STREET PROVIDENCE, RI 02908 USA
DIRECTOR	GEORGE M JACQUES	133 STONE DAM ROAD NORTH SCITUATE, RI 02857 USA
DIRECTOR	MICHAEL STEPHENS	8 PARK AVE CRANSTON, RI 02905 USA
DIRECTOR	BRANDON RUOTOLO	400 J PUTNAM PIKE SUITE 182 SMITHFIELD, RI 02917 USA
DIRECTOR	JOCELYN FELDMAN	30 ARGYLE AVENUE EAST PROVIDENCE, RI 02915 USA
DIRECTOR	CARMEN HOWARD	121 SANDY BROOK ROAD N. SCITUATE, RI 02857 USA
DIRECTOR	JOHN WOLCOTT	55 BRETTON WOODS DRIVE CRANSTON, RI 02920 USA
DIRECTOR	JACK KUNEY	25 COOK ROAD CUMBERLAND, RI 02864 USA
DIRECTOR	MICHAEL CHMURA	3 JAMBRAY DRIVE SMITHFIELD, RI 02917 USA
DIRECTOR	ROGER PELOQUIN	215 ARMISTICE BLVD PAWTUCKET, RI 02860 USA
DIRECTOR	PATRICK TRACEY	43 DENNIS STREET ATTLEBORO, MA 02703 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

NAN LEVINE 197 SLATER AVENUE PROVIDENCE , RI 02906

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

Signed this 24 Day of February, 2011 at 2:46:31 PM. *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 EDWARD M QUEENAN
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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