

A. Ralph Mollis, Secretary of State Corporations Division - F48 W. River Street Providence, Rt 02904-2615

401.222.3040

## NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004.

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. Gorporate ID No.                | 2 Name of Corpo               | 2 Name of Corporation      |                                 |                                     |                      |  |  |  |  |  |
| 000028611                          | Providence .                  | Providence Jewelers' Club  |                                 |                                     |                      |  |  |  |  |  |
| 3 State of Incorporation           | 4 Corporate addi              | ess in Rhode Island - Stre | et Address                      | City                                | Zij)                 |  |  |  |  |  |
| Rhode Island                       | P.O. Box 14                   | 203                        |                                 | East Providence                     | 02914                |  |  |  |  |  |
| 5 Foreign corporation. Enter p     | rincipal office address       |                            | Ciţy                            | State                               | Zip                  |  |  |  |  |  |
|                                    |                               |                            |                                 |                                     |                      |  |  |  |  |  |
| 6 Brief Description of the charact | er of the affairs which       | are actually conducted is  | i Rhode Island                  |                                     |                      |  |  |  |  |  |
| Host social and networking         | ng events for mer             | mbers of the jewelry       | industry                        |                                     |                      |  |  |  |  |  |
| 7 MAMES AND ADDRESS                | TO OF THE OFF                 | CEDS. ("V" DAY TAB         | ATTACHMENTS (7) EILL IN (       | SPACES BEFORE USING ATTACE          | IMENTS               |  |  |  |  |  |
| President Name                     | ES OF THE OFF                 | CERS: ( A BOA FOR          | Vice President Name             | SPACES DEPORE USING ATTACE          | IMENIS               |  |  |  |  |  |
| (See attached)                     |                               |                            | (See attached)                  |                                     |                      |  |  |  |  |  |
| Street Address                     |                               |                            | Street Address                  |                                     |                      |  |  |  |  |  |
| THE THOMAS                         |                               |                            | Sirect Maries                   |                                     |                      |  |  |  |  |  |
| City                               | State                         | Zip                        | City                            | State                               | Zip                  |  |  |  |  |  |
|                                    |                               |                            |                                 |                                     |                      |  |  |  |  |  |
| Secretary Name                     | •                             | •                          | Treasurer Name                  | Treasurer Name                      |                      |  |  |  |  |  |
|                                    |                               |                            |                                 |                                     |                      |  |  |  |  |  |
| Street Address                     |                               |                            | Street Address                  | Street Address                      |                      |  |  |  |  |  |
|                                    |                               |                            |                                 |                                     |                      |  |  |  |  |  |
| City                               | State                         | Ζip                        | City                            | State                               | Zip                  |  |  |  |  |  |
|                                    | _ J                           |                            |                                 | <u> </u>                            | 1                    |  |  |  |  |  |
|                                    |                               |                            |                                 | SPACES BEFORE USING ATTAC           |                      |  |  |  |  |  |
|                                    | TORS OF A DOM                 | IESTIC (RHODE IS           | · .                             | ALL NOT BE LESS THAN THREE          | (3). R.I.G.L. 7-6-23 |  |  |  |  |  |
| Director Name                      |                               |                            | Director Name                   | Director Name                       |                      |  |  |  |  |  |
| (See attached)                     |                               |                            |                                 |                                     |                      |  |  |  |  |  |
| Street Address                     |                               |                            | Street Address                  | Mreet Address                       |                      |  |  |  |  |  |
| ~~~                                |                               | Tau.                       | City                            | State                               | 17.                  |  |  |  |  |  |
| Ctγ                                | State                         | Zip                        | C.1111                          | state                               | 7-                   |  |  |  |  |  |
| Director Name                      |                               |                            | Director Name                   |                                     |                      |  |  |  |  |  |
| Parte in rame                      |                               |                            | 17/7CCO// Name                  |                                     | 100                  |  |  |  |  |  |
| Street Address                     |                               |                            | Street Address                  |                                     |                      |  |  |  |  |  |
|                                    |                               |                            |                                 |                                     |                      |  |  |  |  |  |
| City                               | State                         | Zip                        | Clip                            | State                               | Zip                  |  |  |  |  |  |
| •                                  |                               |                            |                                 |                                     |                      |  |  |  |  |  |
| 9. REGISTERED AGENT I              | N RHODE ISLAN                 | D                          |                                 | •                                   | •                    |  |  |  |  |  |
| This information is seened.        | - العالمية المسترينية الإرازة | Office of the Farmer       | m of State Charman and Fil      | ing of Form 641 D1C1 7.6 137        | טר א ר               |  |  |  |  |  |
| this information is currently      | y or record in the            | Office of the Secretar     | y of State. Changes require fif | ing of Form 641 - R.I.G.L. 7-6-13/7 | /-0-/6               |  |  |  |  |  |
| This report mu                     | ast be signed by e            | ither the President, V     | Vice President, Secretary, Ass  | sistant Secretary, Treasurer, Recei | ver or Trustee       |  |  |  |  |  |

| <b>—</b> 00002861                    | 1 <sub>FILED</sub>      | Under penalty of perjury, I declare and affirm the report, including any accompanying schedules and |                     |
|--------------------------------------|-------------------------|---|---------------------|
| File Date                            | MAR 11 2011<br>y 139758 | Signature of Officer  | 3/10/11<br>Date     |
| By:  FOR SECRETARY OF STATE USE ONLY | 102                     | John J. Kelley III Print or Type Name of Officer Secretary  |                     |
|                                      |                         | Title of Officer  | Loren 621 Pay 00/17 |

| Year/Office | Providence Jewelers' Club Officers and Directors |                     |                 |       |            |  |  |
|-------------|--|---------------------|-----------------|-------|------------|--|--|
|             | Officer Name                                     | Street              | City            | State | Zip Code   |  |  |
| 2004        |  |                     | ,               | •     |            |  |  |
| President   | Gary Leonhardt                                   | 33 Kenney Drive     | Cranston        | RI    | 02920      |  |  |
| VP          | Stephen Perreault                                | 100 Rumstick Rd.    | Barrington      | RI    | 02806      |  |  |
| Treasurer   | Bob Stedman                                      | 134 Burlingame Rd.  | Smithfield      | RI    | 02917      |  |  |
| Secretary   | Robert Halstead                                  | 22 1st Street       | East Providence | RI    | 02914-5007 |  |  |
| Directors   | Peter Manickas                                   | 12 Dunham Street    | Attleboro       | MA    | 02703      |  |  |
|             | Dick Daley                                       | 125 Carlsbad St     | Cranston        | RI    | 02920      |  |  |
|             | Vito Torrisi                                     | 160 Niantic Avenue  | Providence      | RI    | 02907      |  |  |
|             | Brian Fleming                                    | 33 Sutton Avenue    | East Providence | RI    | 02914 •    |  |  |
|             | Meredith Curren                                  | 75 Pennsylvania Ave | Warwick         | RI    | 02888      |  |  |
|             | Frank Williams                                   |                     | •               |       |            |  |  |
|             | Tim Ouhrabka                                     | 160 Rumstick Road   | Barrington      | RI    | 02806-4581 |  |  |
|             | Edward DeCristofaro                              | 30R Houghton St.    | Providence      | RI    | 02904      |  |  |
|             | Bud Lackey                                       | 49 Pearl St.        | Attleboro       | MA    | 02703      |  |  |