

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

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Danielle Blackwell	<u> </u>	Robin Dziuba Street Address 16 Bellsone Drive				
	<u> </u>	Street Address 16 Bellsone Drive				
Street Address	<u> </u>	16 Bellsone Drive				
Street Address	<u> </u>					
3 Kenyon Ave	<u> </u>		ellsone Drive			
City State	100040	City	State	Zip		
East Greenwich RI	02818	Bellingham	MA	02019		
Secretary Name		Treasurer Name				
Jen Dutra		Paula Pais				
Street Address		Street Address				
375 Lloyd Ave Apt 3c		64 Миттау Place				
City State	Zip	City	State	Zip		
Providence RI	02906	Swansea	MA	02903		
8. NAMES AND ADDRESSES OF THE DIR		_				
THE NUMBER OF DIRECTORS OF A DO.	MESTIC (RHODE ISLA)	ND) CORPORATION <u>SHALL N</u>	OT BE LESS THAN THREE	(3). R.I.G.L. 7-6-23		
Director Name		Director Name				
Tracey Tavares		Carol Koper				
Street Address	,,,	Street Address				
3879 South County Trail		76 Charlotte Drive				
City State	Zip	City	State	Zip		
Richmond RI	02836	East Greenwich	RI	02818		
Director Name	, , , , , , , , , , , , , , , , , , , ,	Director Name				
Jenn Dazell		Kim Gauthier				
Street Address		Street Address				
29 Poplar St #2		39 Vaughn Ave				
City State	Zip	City	State	Zip		
Newport RI	02840	Warwick	RI	02886		
9. REGISTERED AGENT IN RHODE ISLAN	ND		-			
This information is currently of record in the	e Office of the Secretary of	of State. Changes require filing of	Form 641 - R.I.G.L. 7-6-13/7	-6-78		
This report must be signed by	either the President, Vice	e President, Secretary, Assistant	Secretary, Treasurer, Receiv	ver or Trustee		

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Onder penanty of perjury, I declare and arr	irm inat i nave examined this
report, including any accompanying schedu	les and statements, and that all
statements contained herein are true and con	rrect.
Taula Paro	<u>3.10.2011</u>
Signature of Officer	Date
Paula Pais	
Print or Type Name of Officer	
Treasurer	

Title of Officer

Тгасу	Connie	Paula	Carol	Kimberly	Sherry	Robin	Jennifer	Jenn	Judith	Danielle	First Name
		Ü					Þ	z			<u>₹</u>
Tavares	Palagi	Pais	Koper	Gauthier	Ferdinandi	Dziuba	Dutra	Dazell-Pinkowski	Clare	Blackwell	Midd Last Name
Tracy	Connie		Carol		Sherry	Robin			ybut	Danielte	Nick Nam
LGC&D Marketing Coort Work	Pickles Cus Owner	Sovereign I Vice Presi	Amgen Director Home	Amgen Rhode Island	Restivo Mc CPA	Merrill Lyn Vice Presi	UPS Director, Busines Home		Judy Bryant Uni [,] Director	Amgen	Nick Name Address Ty Organizatio
Coort \		dent)	_	_		dent (Busine: 1	_	_	_	3
Vork	Work	tome	forme	tome	Vork	Vork	fome	Home	Work	Home	Title
10 Weybosset St Ste 700	135 Frenchtown Rd	64 MURRAY PL	76 Charlotte Dr	39 Vaughn Ave	36 Exchange Ter	1 Citizens Plz Ste 1000	375 Lloyd Ave Apt 3C	29 Poplar St # 2	1150 Douglas Pike	3 Kenyon Ave	Address Line 1
Providence	North Kingstown	SWANSEA	East Greenwich	Warwick	Providence	Providence	Providence	Newport	Smithfield	East Greenwich	City
22	굔	ΝÞ	22	22	콛	굔	콛	굔	2	굔	State
02903-2863	02852-1783	02777-5055	02818-4805	02886-3124	02903-1743	02903-1360	02906-4271	02840-2437	02917-1291	02818-2903	Postal Code
Work	Work	Home	Work	Work	Work	Work	Mobile	Home	Work	Work	Phone Typ
(401) 421-4800	(401) 884-1828	(774) 488-9802	(401) 265-7434	(401) 392-8347			(508) 243-1073	(401) 849-4544	(401) 232-6090	(401) 392-8846	Phone Typ Phone Nur Extension E-Mail Address
ttavares@lgcd.com	conniep3@cox.net	ppais35@yahoo.com	carol_K_mail@yahoo.com	kschultz323@hotmail.com	sferdinandi@rm-llp.com	Robin_Dziuba@ml.com	jen.dutra@yahoo.com	jennifer.dazell@gmail.com	jclare@bryant.edu	blackwed@amgen.com	E-Mail Address

