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

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 penalty fee of $25.00.*

1. Corporation	Name of Corporation		
35850	Rhode Island Alpha Delta Kappa		
3. State of Incorporation	4. Corporate address in Rhode Island - Street Address	City	Zip
RI	170 Providence Pike #75	No Smithfield	02896
5. **Foreign corporation.** Enter principal office address	City	State	Zip
		RI	

6. *Brief Description of the character of the affairs which are actually conducted in Rhode Island*

7. NAMES AND ADDRESSES OF THE OFFICERS: *("X" BOX FOR ATTACHMENT)* ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name			Vice President Name		
Arlene Nappa			Joyce Neves		
Street Address			Street Address		
807 Richmond Dr.			135 Clark Rd.		
City	State	Zip	City	State	Zip
Warwick	RI	02888	Cumb.	RI	02864
Secretary Name			Treasurer Name		
Linda Menard			Pauline Hynes		
Street Address			Street Address		
3 Sunset Dr.			170 Providence Pike #75		
City	State	Zip	City	State	Zip
Manville	RI	02838	No Smithfield	RI	02896

8. NAMES AND ADDRESSES OF THE DIRECTORS: *("X" BOX FOR ATTACHMENT)* ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

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

Director Name			Director Name		
Anne Schifino			Jackie Plante		
Street Address			Street Address		
101 Shirley Dr.			11 Sparrow Ln.		
City	State	Zip	City	State	Zip
Cumb	RI	02864	Warwick	RI	02889
Director Name			Director Name		
Renee Flouette					
Street Address			Street Address		
15 Scott St.					
City	State	Zip	City	State	Zip
Bellingham	MA	02019			

9. REGISTERED AGENT IN RHODE ISLAND

This information is currently of record in the Office of the Secretary 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 President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee.

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FILED

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By 142892

File Date _____

Check No. _____

By: _____

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Pauline Hynes — 4/15/11
Signature of Officer — *Date*

Pauline Hynes
Print or Type Name of Officer

Treasurer
Title of Officer