

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

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 co: pration 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

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1. Corporate ID No. 1597	5	2. Name of Corporation BABCOCK	-SMITH HOU	SE DOCEUTS,				
3. State of Incorpo	ration		bode Island - Street Address ANITE STRE	ET	WESTERLY	02891		
	•	cipal office address		City	State	ZФ		
6. Brief Description of the character of the affair which are actually conducted in Rhode Island EDUCATION, TOURS & FUNDRAISING TO SUPPORT HISTORIC HOUSE MUSEUM								
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS								
President Name MARY	LOU WA	LTEZ		VICE President Name MARY AUN MCCARTY				
Street Address 28 CANYON DRIVE				Street Address OLD HOPKINTON PEAD				
City WESTE	RLY	State P4	zip 02891	WESTERLY	State P1	02891		
Secretary Name MARC	ARET	BARCLAY		JAUICE TI	UNNEY			
Street Address	CAPTAI	US DRIVE		Street Address ELM 5	TREET			
WEST	ERLY	State P4	^{Zip} 02891	WESTERLY	State 72	^{z4} 02891		
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 TALL	Y SAR	DELL		WANDA BUTLER				
Street Address E	DUEWO	OD AVENL	E	Street 875 SHORE	ROAD			
"WESTE	RLY	State P4	^{Zip} 02891	WESTERLY	State 124	²⁴⁰ 02891		
Director Mpp	E SIL	VESTR!		Director Name BERTA	BURKHARD	π		
Street Address	BELLAI	RE STREE		Street Address PAWCA	TUCK AVEN	VE		
WEST 9. REGISTER		State C RHODE ISLAND	^{zip} 02891	CHWESTERLY	State 124	202891		
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								

	FILFD				
File Date _	JUN 03 2011				
Check No	0\/	-1000			
Ву:	RY_	V 1/V 1			

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.

statements contained herein are true and correct.

Print or Type Name of Officer

Signature of Officer Date

JANICE TUNNEY, TREASURER

Corporate ID#: 75975

Name of Corporation: Babcock-Smith House Docents, Inc.

7. Additional Officer: Co-President

Ronald Brunelle 84 Palmer Street Pawcatuck, CT 06379

8. Additional Director: Eleanor Grinnell

50 Shirley Drive

Charlestown, Ri 02813

FILED

JUN 03 2011

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