

penalty fee of \$25.00.

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 2011

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

No. 41 Patrons 5. Foreign corporation. Enter principal office address 6. Brief Description of the character of the affairs which are actually conducted in Rhode Island Organization 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) \Box FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name Street Address Doris Ave 62889 arusi che Cumberlan 02864 Treasurer Name Street Address Dons 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 Street Address Street Address XAP 62888 02910 Director Name

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

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

| | FILED |
|-----------|---------------------------------|
| File Date | JUN OF LUIT |
| Check No. | By ////// |
| | FOR SECRETARY OF STATE USE ONLY |

9. REGISTERED AGENT IN RHODE ISLAND

| Under penalty of perjury, I declare and affirm th report, including any accompanying schedules and | at I have examined thi I statements, and that al |
|--|---|
| statements contained herein are true and correct. | 6/7/11 |
| Signature of Officer Joan L. Clega | *Date |
| Print or Type Name of Officer Trea Surer | |
| Title of Officer | |