



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

Fee: \$20.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Non-Profit Corporation
Annual Report**

Filing Period: June 1 - June 30

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.

ANNUAL REPORT YEAR: 2011

1. Corporate ID No. 000039552

2. Name of Corporation KIDS KLUB, INC.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 301 CONCORD STREET SUITE 301

City or Town: PAWTUCKET

State: RI Zip: 02860 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

TO PROVIDE CHILDCARE AND EDUCATIONAL SUPPORT AND SERVICES TO CHILDREN,
YOUTH AND FAMILIES

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

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

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	RONALD R SMITH	6 TWIN RIVER RD LINCOLN, RI 02865 USA
TREASURER	AMY S VOGEL	6 TWIN RIVER RD LINCOLN, RI 02865 USA
SECRETARY	TRACY CHENEY	263 RAILROAD ST MANVILLE, RI 02838 USA
VICE PRESIDENT	ANTHONY ANNOTTI	1 OLD GREENVILLE RD JOHNSTON, RI 02919 USA
DIRECTOR	KAREN E. ANNOTTI	1 OLD GREENVILLE ROAD JOHNSTON, RI 02919
DIRECTOR	RONALD R SMITH	6 TWIN RIVER RD LINCOLN, RI 02865 USA
DIRECTOR	AMY S VOGEL	6 TWIN RIVER RD LINCOLN, RI 02865 USA

8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

MARYANN SHALLCROSS SMITH 203 CONCORD STREET, SUITE 301 PAWTUCKET , RI 02860

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

Signed this 17 Day of June, 2011 at 9:40:18 AM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By AMY S. VOGEL
Signature of Officer of the Corporation

President or Vice President or Secretary or Assistant Secretary or

Treasurer or Receiver or Trustee (check one)

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in Section 7.

Form No. 631
Revised 09/07

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