

A. Ralph Mollis, Secretary of State Corporations Division

148 W. River Street

Providence, RI 0290+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 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

penatry fee of \$25.00.					
99754	2. Name of Corpora	eds of The	Mosh 455UCK	•	111
Khode Foland	1. Corporate addres	s in Rhode Island, Street Addi		Providence	02906
S Foreign corporation, Enter pr	vicipal office address		City	State	Zifi
6 Fing Description of the character	r of the affairs which a	re actually conducted in Rhode	eished		<u> </u>
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Freshleyt Name AV Hur Pl.74			Vice yesiden Name Bruck Campbell		
500 4 4 CO 0/4 St			street Address Gent tun St		
Pawtreket	Stange	01860	Prondence	Siene	errol
Kathleen Rourke			Treasyrer Name OVE9 GOVVIIT		
Strong Address H St			Street Addrals 6/h ST		
providence	Stand	200 PG	Providence	SING	10 MOG
8. NAMES AND ADDRESSI		CTORS: ("X" BOX FOR AT		S BEFORE USING ATTAC	
THE NUMBER OF DIRECT	TORS OF A DOME	STIC (RHODE ISLAND) CORPORATION SHALL NO	T BE LESS THAN THREE	E (3). R.I.G.L. 7-6-23
Paul McElvoy			Junes Kelley		
5. Urban Ave			Street Address 1922 PH ST		
W. Prossence	State L	20404	Progradance	Siene	D1906
Today Hadley			Director Name Kovte		
Siren Addres			Siren Address Loriner Atte		
Unaln	SIGNE	D1865	Providence	Starp	200906
9. REGISTERED AGENT IN	RHODE ISLAND	·		•	28
·· · · · · · · · · · · · · · · · · · ·			tate. Changes require filing of F		7-6-78
This report mu	st be signed by eit	her the President, Vice P	resident, Secretary, Assistant S	Secretary, Treasurer, Rece	
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File Date Check No.	'JUN 21 2011				
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FOR SECRETARY OF STATE USE ONLY					

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Under penalty of perjury, I declare and affirm to	that I have examined this
report, including any accompanying schedules a	
statements contained herein are true and correct.	61.11
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Signature of Officer	Date
Oveg Gentt	
Print or Type Name of Officer	······································
Tregiver	
Thle of Officer	
	Form 631 Rev. 09/17