



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 02904-2611
401.222.3044

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 penalty fee of \$25.00.

1. Corporate ID No. 72733		2. Name of Corporation FRIENDS of the BROWNELL LIBRARY			
3. State of Incorporation RI		4. Corporate address in Rhode Island - Street Address PO BOX 523		City LITTLE COMPTON	Zip 02837
5. Foreign corporation. Enter principal office address NA		City NA		State NA	Zip NA
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island RAISE MONIES FOR THE BROWNELL LIBRARY					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name DEE HOLIDAY			Vice President Name BARBARA DUFFY		
Street Address PO BOX 449			Street Address 8 EAST VIEW DR		
City LITTLE COMPTON	State RI	Zip 02837	City LITTLE COMP.	State RI	Zip 02837
Secretary Name LILLIAN EDWARDS			Treasurer Name STUART MORGAN		
Street Address 154 QUICKSAND POND			Street Address 50 S. SHORE RD		
City LITTLE COMPTON	State RI	Zip 02837	City LITTLE COMP.	State RI	Zip 02837
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 PAT HAGEN			Director Name PATRICIA MENOCHIE		
Street Address 120 MAPLE AVE			Street Address 321 B LONG HIGHWAY		
City LITTLE COMPTON	State RI	Zip 02837	City LITTLE COMPTON	State RI	Zip 02837
Director Name NAYA GOFF			Director Name JUAN CARSON		
Street Address 236 WESTMARTIN ST APT 405			Street Address PO BOX 1023		
City PROVIDENCE	State RI	Zip 02726	City LITTLE COMP	State RI	Zip 02837
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

FILED	
File Date	JUN 23 2011
Check No.	1339
BY	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.

Signature of Officer **STUART MORGAN** Date **6/20/11**
Print or Type Name of Officer
TREASURER
Title of Officer