



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. 000031001

2. Name of Corporation SCITUATE ART FESTIVAL, INC.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 25 DANIELSON PIKE

P.O. BOX 46

City or Town: NORTH SCITUATE

State: RI Zip: 02857 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

ENCOURAGING ARTS AND CRAFTS, CONDUCTING ART FESTIVALS AND EXHIBITIONS AND TO USE THE PROCEEDS THEREFROM FOR CIVIC, CULTURAL, ARTISTIC AND EDUCATIONAL AND OTHER CHARITABLE PURPOSES.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	CHRISTOPHER CALOURI	P.O. BOX 220 NORTH SCITUATE, RI 02857 USA
TREASURER	KATHLEEN L BIANCHI	130 PEEPTOAD ROAD N. SCITUATE, RI 02857 USA
SECRETARY	PAULA GORMLEY	74 FRANKLIN ROAD FOSTER, RI 02825 USA
ASSISTANT TREASURER	ROBERT PROVOST	24 WALKER WAY N. SCITUATE, RI 02857 USA
VICE PRESIDENT	PAUL LEVEILLEE	256 WESTCOTT ROAD N. SCITUATE, RI 02857 USA
DIRECTOR	JUNE ALBANESE	18 MOUNTAIN LAUREL LANE N. SCITUATE, RI 02857 USA
DIRECTOR	REGINALD CENTRACCHIO	342 OLD PLAINFIELD PIKE SCITUATE, RI 02857 USA
DIRECTOR	WARNER DAUPHINEE	51 ORCHARD DRIVE HOPE, RI 02823 USA
DIRECTOR	SHEILA DURFEE	45 DEERFIELD DRIVE N.SCITUATE, RI 02857 USA
DIRECTOR	BRENDA FREDERICKSON	1051 CHOPMIST HILL ROAD N.SCITUATE, RI 02857 USA
DIRECTOR	KATHLEEN TENCZAR	32 SILK LANE N.SCITUATE, RI 02857 USA
DIRECTOR	JEANNINE VACHON	32 SILK LANE N.SCITUATE, RI 02857 USA
DIRECTOR	JOHN F WINFIELD, JR.	727 HARTFORD PIKE N. SCITUATE, RI 02857 USA
DIRECTOR	EDWIN GOULD	36 SPRUCE BROOK ROAD N.SCITUATE, RI 02857 USA
DIRECTOR	JANE GURZENDA MS.	25 DANIELSON PIKE N.SCITUATE, RI 02857 USA
DIRECTOR	LINDA SOPRANO	4 NOTTINGHAM DRIVE HOPE, RI 02823 USA
DIRECTOR	COLLEEN LAGUEUX	564 ROCKY HILL ROAD N.SCITUATE, RI 02857 USA
DIRECTOR	LILLIAN ZARLI	263 BUNGY ROAD N.SCITUATE, RI 02857 USA
DIRECTOR	DALE ANTONELLI	30 WILKINSON ROAD N.SCITUATE, RI 02857 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**

KATHLEEN L. BIANCHI 130 PEEPTOAD ROAD NORTH SCITUATE , RI 02857

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

Signed this 6 Day of July, 2011 at 12:38:52 PM. 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 KATHLEEN L BIANCHI
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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