



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 02904-2615  
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 penalty fee of \$25.00.

1. Corporate ID No. 27384		2. Name of Corporation Newport County Board of Realtors Inc.			
3. State of Incorporation Rhode Island		4. Corporate address in Rhode Island - Street Address 26 Valley Road		City Middletown	Zip 02842
5. Foreign corporation. Enter principal office address			City	State	Zip
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island					
President Name Michelle Drum			Vice President Name Connor Dowd		
Street Address 37 Bellevue Avenue			Street Address 809 Aquidneck Avenue		
City Newport	State RI	Zip 02840	City Middletown	State RI	Zip 02842
Secretary Name			Treasurer Name Mary Monk		
Street Address			Street Address 55 Memorial Blvd.		
City	State	Zip	City Newport	State RI	Zip 02840
Director Name Jack McVicker			Director Name Annie Becker		
Street Address 55 Memorial Blvd.			Street Address 3 Memorial Blvd.		
City Newport	State RI	Zip 02840	City Newport	State RI	Zip 02840
Director Name Julieann Costa			Director Name Julieann Costa		
Street Address 809 Aquidneck Avenue			Street Address 809 Aquidneck Ave		
City Middletown	State RI	Zip 02842	City Middletown	State RI	Zip 02842
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**

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]*  
Signature of Officer  
Date 5/10/11

*[Signature]*  
Print or Type Name of Officer

*[Signature]*  
Title of Officer