

A. Raiph 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 for of \$25,00

penalty fee of \$25.00.							
1 Corporate ID No	2 Name of Corporation			_			
3106կ	Rhode Is	land Taxpay	vers Association	1	Zip		
3 State of Incorporation	1	Rhode Island - Street Addre		City	02908		
Rhode Island	117 Kent	land Avenue	9	Providence			
5. Foreign corporation. Enter princ	cipal office address		City	State	Zip		
6. Brief Description of the character of	of the affairs which are a	ctually conducted in Rhode	Island				
Civic.				PREADE HEING ATTACH	IMENTS		
7. NAMES AND ADDRESSES	OF THE OFFICER	S: ("X" BOX FOR ATTA	CHMENT) [] FILL IN SPACES	gal Counsel	IML(113		
President Name	+		•				
Farrell Sylv	earer.		Farrell Sy	Lvester			
Street Address			1.	Street Address			
117 Kentland Avenue			117 Kentland Avenue				
City	State	Zip	Providence	R. I.	02908		
Providence	R. I.	02908	Treasurer Name	11.6 1.6	1 02/00		
Secretary Name							
Christian Ta	zurcanu		Farrell Sylvester Street Address				
Street Address	.1 04	_	• • • • • • • • • • • • • • • • • • • •	117 Kentland Avenue			
115 St. Ster	7		City	State	Zip		
Guy Boston	State Ma	<sup>zφ</sup> 02115	Providence	R. I.	02908		
			(ACHMENT) FILL IN SPACE				
8. NAMES AND ADDRESSES	S OF THE DIRECTO	JRS: ( X BOX FOR AL.	CORPORATION SHALL NO	OT RE LESS THAN THREE	E (3). R. L.G. L. 7-6-23		
	ORS OF A DOMEST	IC (KHODE ISLAND	Director Name	.,, .,, .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2 (3):		
"Director Name			200	200			
Farrell Sylvester			George R. McLeod				
Street Address			115 St. Stephen Street				
117 Kentland	· · · · · · · · · · · · · · · · · · ·			State	Zip		
City	State T	02908	Boston	Ma.	92115		
Providence	R. I.	02,700		1 100			
Director Name			Director Name				
Christian Tzurcanu			Street Address		— <u> </u>		
Street Address 115 St. Stephen Street			Street Actives		. ~		
	<del></del>		Gity	State	Zip		
City	State	02 <b>11</b> 5	J,		Marga.		
Boston 9. registered agent in	Ma.	1 05112	•	1	1 5 : -**		
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This information is currently	of record in the Offi	ice of the Secretary of S	tate. Changes require filing of	Form 641 - R.I.G.L. 7-6-13/	7-6-78		
Till		s the Descident Vice S	resident, Secretary, Assistant	Secretary Treasurer Rece	iver or Trustee		
this report mus	it ne signea by eithe	i the riesident, vice r	reasurem, occionary, masiatant	Content, frondator, reco	, 01 114,000		

File DateFILED	
Check No JUL 22 2011	
By. By (1/895%	
FOR SECRETARY OF STATE USE OFFET	

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 confect.

Frank 11 2	) ater	June	12.	2013
Signature of Officer	0 0		Do	ue

Farrell Sylvester

Print or Type Name of Officer

President Title of Officer