STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040 ~ **Email:** corporations@sos.ri.gov ~ **Website:** www.sos.ri.gov

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2012

Filing Period: June 1 - June 30 • **This report must be typed or printed legibly.**
Filing Fee: $20.00 • **FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A $25.00 PENALTY FEE.**

1. Entity ID No.	2. Exact name of the Corporation		
000026193	**Alpha Rho Chapter of Tau Kappa Epsilon Fraternity**		
3. State of Incorporation: **RI**	4. Corporate Address in RI - Street Address: **29 Lower College Rd.**	City: **Kingston**	Zip: **02812**
5. Foreign corporation. Enter principal office address	City	State	Zip
6. Brief description of the character of business conducted in Rhode Island: **Social Fraternity**			

7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐

President Name: **Earl Adams**			Vice-President Name: **Raymond Goppold**		
Street Address: **400 South County Trail - Ste. A102**			Street Address: **29 Lower College Rd.**		
City: **Exeter**	State: **RI**	Zip: **02822**	City: **Kingston**	State: **RI**	Zip: **02812**
Secretary Name: **George Xiarhos**			Treasurer Name: **Edward Ernst**		
Street Address: **29 Lower College Rd.**			Street Address: **29 Lower College Rd.**		
City: **Kingston**	State: **RI**	Zip: **02812**	City: **Kingston**	State: **RI**	Zip: **02812**

8. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) ☐

Director Name: **Raymond Goppold**			Director Name: **Edward Ernst**		
Street Address: **29 Lower College Rd.**			Street Address: **29 Lower College Rd.**		
City: **Kingston**	State: **RI**	Zip: **02812**	City: **Kingston**	State: **RI**	Zip: **02812**
Director Name: **George Xiarhos**			Director Name: **Earl Adams**		
Street Address: **29 Lower College Rd.**			Street Address: **29 Lower College Rd.**		
City: **Kingston**	State: **RI**	Zip: **02812**	City: **Kingston**	State: **RI**	Zip: **02812**

9. REGISTERED AGENT IN RHODE ISLAND
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 641.

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

FILED
JUN 06 2012
1601

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.

5-16-12
Signature of Officer — Date

Earl Adams
Print or Type Name of Officer

President
Title of Officer

File Date _____
Check No _____
By: _____
FOR SECRETARY OF STATE USE ONLY

Form No. 631
Revised: 01/2012