



**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: 2012

1. Corporate ID No. 000066899

2. Name of Corporation Rhode Island Driving Club

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 179 IDE ROAD
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

TO FOSTER & ENCOURAGE GOOD RELATIONS BETWEEN ALL HORSE RELATED ORGANIZATIONS IN RI

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	MAGUERITE TOMANY	P.O. BOX 253 THOMPSON, CT 06277 USA
TREASURER	BONNIE L JEAN	100 MONSON ROAD WALES, MA 01081 USA
DIRECTOR	JANICE MESZOELY	158 SOUTH MAIN STREET MANSFIELD, MA 02048 USA
DIRECTOR	LEONA ANASTASI	584 PROSPECT STREET WOODSTOCK, CT 06281 USA
DIRECTOR	CATHERINE LUCE	135 EAST STREET WRENTHAM, MA 02093 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**

PEGGY COST 179 IDE 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 8 Day of June, 2012 at 2:46:42 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 BONNIE L. JEAN

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

© 2007 - 2012 State of Rhode Island and Providence Plantations
All Rights Reserved