



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 2012

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. 540904		2. Name of Corporation FRIENDS OF THE PROVIDENCE ANIMAL CARE & CONTROL CENTER			
3. State of Incorporation RHODE ISLAND		4. Corporate address in Rhode Island - Street Address C/O STEPHEN T. NAPOLITANO, 155 SOUTH MAIN STREET, 2		City PROVIDENCE	Zip 02903
5. Foreign corporation. Enter principal office address N/A		City	State	Zip	
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island ✓					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name FLORETTE RUGGIERO			Vice President Name RUTH COLWILL, MD		
Street Address 33 SOCIAL STREET			Street Address 174 HALLVILLE ROAD		
City PROVIDENCE	State RI	Zip 02904	City EXETER	State RI	Zip 02822
Secretary Name LINDA MILLER			Treasurer Name NICHOLAS NARDUCCI, JR.		
Street Address 91 LONGWOOD AVENUE			Street Address 36 LANGDON STREET		
City WARWICK	State RI	Zip 02822	City PROVIDENCE	State RI	Zip 02904
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23					
Director Name FLORETTE RUGGIERO			Director Name RUTH COLWILL, MD		
Street Address SAME AS ABOVE			Street Address SAME AS ABOVE		
City	State	Zip	City	State	Zip
Director Name LINDA MILLER			Director Name NICHOLAS NARDUCCI, JR.		
Street Address SAME AS ABOVE			Street Address SAME AS ABOVE		
City	State	Zip	City	State	Zip
9. REGISTERED AGENT IN RHODE ISLAND					
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

540904

JUN 08 2012

164

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.

FLORETTE RUGGIERO

Print or Type Name of Officer

PRESIDENT

Title of Officer

Date

06/06/2012

File Date _____
Check No. _____
By: _____
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