



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/business

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. <u>128301</u>		2. Exact name of the Corporation <u>Wakefield Concert Band</u>	
3. State of Incorporation <u>RI</u>		4. Brief description of the character of business conducted in Rhode Island <u>Perform concerts for the community and advance musical education for all ages</u>	
5. Principal office address <u>3629 Tower Hill Rd</u>		City <u>Wakefield</u>	State <u>RI</u>
		Zip <u>02879</u>	
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
President Name <u>David Stephenson</u>		Vice-President Name <u>Eileen Shanely</u>	
Street Address <u>3629 Tower Hill Rd</u>		Street Address <u>29 Briarwood Lane</u>	
City <u>Wakefield</u>	State <u>RI</u>	City <u>Wakefield</u>	State <u>RI</u>
Zip <u>08287</u>		Zip <u>02879</u>	
Secretary Name <u>Sarah Denis</u>		Treasurer Name <u>Stephen Hiss</u>	
Street Address <u>41 Left Ridge Lane</u>		Street Address <u>85 Sweet Lane</u>	
City <u>Wakefield</u>	State <u>RI</u>	City <u>North Kingstown</u>	State <u>RI</u>
Zip <u>02879</u>		Zip <u>02852</u>	
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
Director Name <u>Lawrence Grebstein</u>		Director Name <u>Jay Swaboda</u>	
Street Address <u>170 Springdale Drive</u>		Street Address <u>31 Larkspur Pond Rd</u>	
City <u>Kingston</u>	State <u>RI</u>	City <u>West Kingston</u>	State <u>RI</u>
Zip <u>02874</u>		Zip <u>02892</u>	
Director Name <u>Barry Lieberman</u>		Director Name	
Street Address <u>Po Box 404</u>		Street Address	
City <u>Saunderstown</u>	State <u>RI</u>	City	State
Zip <u>02874</u>		Zip	
8. 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

File Date _____

Check No _____

By: _____

FOR SECRETARY OF STATE USE ONLY

JUN 08 2012

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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.

Stephen Hiss 6/6/12
 Signature of Officer Date

Stephen Hiss
 Print or Type Name of Officer

Treasurer
 Title of Officer