RI SOS Filing Number: 201294052610 Date: 06/15/2012 4:00 PM

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.	2. Exact name of the Corporation
156348	**The Courthouse Theater Company**
3. State of Incorporation	4. Brief description of the character of business conducted in Rhode Island
Rhode Island	**Theater**

5. Principal office address	City	State	Zip
28 Caswell St.	**Narragansett**	**RI**	**02882**

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

President Name	City	State	Zip	Vice-President Name	City	State	Zip
Terrence Simpson				**None.**			
Street Address: **145 Enterprise Terrace**	**Kingston**	**RI**	**02881**	Street Address:			
Secretary Name: **Margelia H. Rogers**				Treasurer Name: **Joseph Viele**			
Street Address: **203 Greenwood Dr.**	**Wakefield**	**RI**	**02879**	Street Address: **882 Broadrock Road**	**Wakefield**	**RI**	**02879**

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

Director Name	City	State	Zip	Director Name	City	State	Zip
Mitchell Berman				**Nicholas Bockstael**			
Street Address: **69 Village Court**	**West Warwick**	**RI**	**02893**	Street Address: **122 Torrey Rd**	**Wakefield**	**RI**	**02879**
Director Name: **Christopher Simpson**				Director Name: **Carla Davis**			
Street Address: **145 Enterprise Terr.**	**Kingston**	**RI**	**02881**	Street Address: **1316 Post Road**	**Wakefield**	**RI**	**02879**

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 _____ JUN 15 2012

Check No _____ By mma

By: _____ CR #1685

FOR SECRETARY OF STATE USE ONLY

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.

J Viele 6/14/12
Signature of Officer Date

JOE VIELE
Print or Type Name of Officer

TREAS.
Title of Officer

Form No. 631
Revised: 05/2012
79403-34-766052

401 218 0282
www.thecontemporarytheater.com
the contemporary theater co.

the theater
327 Main St.
Wakefield, RI 02879

the workshop
50 S. County Commons Way
South Kingstown, RI 02879

Entity ID: 156348

ADDITIONAL DIRECTORS

Deborah Mathews
71 Queens River Drive
West Kingston, RI 02892

Amanda Woodward
51 Holly St.
Providence, RI 02906