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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
65740 RIMLE	**Rhode Island Middle Level Educators Association**
3. State of Incorporation	4. Brief description of the character of business conducted in Rhode Island
Rhode Island	**Professional Development and advocacy organization**

5. Principal office address	City	State	Zip
255 Westminster Street	**Providence**	**RI**	**02903**

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

President Name	Street Address	City	State	Zip
Ms. Deborah Scarpelli	**5 Jennifer Lane**	**N. Smithfield**		**02896**

Vice-President Name	Street Address	City	State	Zip
Dr. Richard Drolet	**20 Forest View Drive**	**Cumberland**	**RI**	**02864**

Secretary Name	Street Address	City	State	Zip
Ms. Patricia Marcotte	**61 Homefield Avenue**	**Providence**	**RI**	**02908**

Treasurer Name	Street Address	City	State	Zip
Ms. Carolyn Higgins	**36 Hallmard Drive**	**Warwick**	**RI**	**02886**

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

Director Name	Street Address	City	State	Zip
Dr. Michael Almeida	**87 Miller Avenue**	**Rumford**	**RI**	**02916**

Director Name	Street Address	City	State	Zip
Mr. Ken Kard	**3880A Old Post Road**	**Charlestown**	**RI**	**02813**

Director Name	Street Address	City	State	Zip
Mr. Adam Scott	**548 Grand Avenue**	**Pawtucket**	**RI**	**02861**

Director Name	Street Address	City	State	Zip
Ms. Deborah Westgate Silva	**8 Elmwood Drive**	**Bristol**	**RI**	**02809**

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

File Date _____

Check No _____

By: _____

FOR SECRETARY OF STATE USE ONLY

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JUN 18 2012
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Form No. 631
Revised: 05/2012

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.

Debra A Scarpelli 6/14/12
Signature of Officer Date

Debra A. Scarpelli
Print or Type Name of Officer

President
Title of Officer

79492-29-761631