

Form No. 631

Revised: 05/2012

## 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

1. Entity ID No.	2. Exact na	2. Exact name of the Corporation				
30498	Rhode I	Rhode Island Mineral Hunters				
3. State of Incorporation	4. Brief des	cription of the character of	business conducted in Rhode Is	sland		
Rhode Island	Study o	Study of minerals, crystals, fossils, and all aspects of Earth Sciences.				
5. Principal office address 43 Madeleine Ave			City Woonsocket	State RI	Zip 02895	
	NAMES AND ADDI	RESSES) ("X" BOX FOR				
President Name			Vice-President Name			
Anthony Cesana Street Address			David Lavoie			
Street Address 85 Saint Paul St.			Street Address 22 Bradford Ct.			
ity State Zip			City State Zip			
N. Smithfield	RI	02896	W. Warwick	Ri	Zep	
Secretary Name	<del></del>		Treasurer Name	1-3-	<del></del>	
Jennifer Davis			Claire Cooper			
Street Address			Street Address			
15 Peace Pipe Trail			43 Madeleine Ave			
City	State	Zip	City	State	Zip	
Smithfield	RI	02917	Woonsocket	RI	02895	
("X" BOX FOR ATTAC	(NAMES AND ADD HMENT)	ORESSES). RHODE ISLA	ND CORPORATIONS <u>MUST</u> L	IST NO LESS THAN	THREE (3) DIRECTO	
Director Name			Director Name			
homas Barbish			Sue Lavoie			
treet Address 1564 Harkney Hill Road			Street Address 22 Bradford Ct.			
ity	State	Zip	City	State	Zip	
overtry	RI	02816	W. Warwick	RI		
irector Name Bill <b>Wilson</b>			Director Name			
treet Address 9B Pheasant Run			Street Address			
ity S <b>mithfield</b>	State RI	Zip 02917-2556	City	State	Zip	
REGISTERED AGENT	N RHODE ISLAND					
		e Office of the Secretary	of State. Changes require filin	g Form 641		
			dent, Secretary, Assistant Secre		iver or Trustee	
File Date			Under penalty of perjury this report, including an	, I declare and affin	n that I have examine	
THE VALE		FILED	and that all statements o	y eccompanying sc contained herein an	nouvies and stateme true and correct	
Check No		I Islah				
Du.		JUN 1 9 2012	Signature of Officer	poper	<u> </u>	
PJ		0014   9 Z01Z	•		Date	
		IIUU	Print or Type Name of Offi	06.5000		
FOR SECRETARY OF S	TATE USE ONLY	1177	The Cartain Contraction of	- C3 3 P = UC		

TREPSURER

Title of Officer