



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. 26744		2. Exact name of the Corporation Ashaway Free Library			
3. State of Incorporation Rhode Island		4. Brief description of the character of business conducted in Rhode Island Public Library Services			
5. Principal office address 15 Knight Street		City Ashaway	State RI	Zip 02804	
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name vacant		Vice-President Name Robert Ward Jr			
Street Address		Street Address 30 Diamond Hill Road			
City	State	Zip	City	State	Zip
			Ashaway	RI	02804
Secretary Name Gregory Benoit		Treasurer Name Justin Payne			
Street Address 14 Cemetery Lane		Street Address 164 Ashaway Road			
City	State	Zip	City	State	Zip
Ashaway	RI	02804	Bradford	RI	02808
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
Director Name Lorna Caulfield		Director Name Aurelia DeAngelis			
Street Address 98 Tomaquag Valley Road		Street Address 164 Main Street			
City	State	Zip	City	State	Zip
Bradford	RI	02808	Ashaway	RI	02804
Director Name Judie Freeman		Director Name Marvin Goodman			
Street Address 33 Butterfly Drive		Street Address 14 Boulder Road			
City	State	Zip	City	State	Zip
Westerly	RI	02891	Hopkinton	RI	02833
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

BY

FILED

JUN 19 2012

7880

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.

Justin Payne
Signature of Officer

6/18/2012

Date

Justin H. Payne

Print or Type Name of Officer

Treasurer

Title of Officer

ATTACHMENT FOR ASHAWAY FREE LIBRARY, CORPORATE ID NO. 26744

ADDITIONAL DIRECTORS:

Mary E. Mercer
13 South Drive
Ashaway, RI 02804

Gordon Oates
5 Knight Street
Ashaway, RI 02804

Linda Sardone
57 Tomaquag Valley Road
Ashaway, RI 02804

FILED

JUN 19 2012

BY

JD 26744