



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>28974</u>		2. Exact name of the Corporation <u>Parents and Central's Teachers (P.A.C.T.)</u>	
3. State of Incorporation <u>RI</u>		4. Brief description of the character of business conducted in Rhode Island <u>to provide additional enrichment to the student body of Lincoln Central Elementary School.</u>	
5. Principal office address <u>1081 Great Road</u>		City <u>Lincoln</u>	State <u>RI</u>
		Zip <u>02865</u>	
LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
President Name <u>Elisa Mc Donough</u>		Vice-President Name <u>Joy Bolduc</u>	
Street Address <u>10 Preakness Drive</u>		Street Address <u>2 Simon Sayles Rd</u>	
City <u>Lincoln</u>	State <u>RI</u>	Zip <u>02865</u>	
Secretary Name <u>Melissa Lezon</u>		Treasurer Name <u>Alexandra Pepin</u>	
Street Address <u>30 Skeple Lane</u>		Street Address <u>12 Lawrence Lane</u>	
City <u>Lincoln</u>	State <u>RI</u>	Zip <u>02865</u>	
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>Patricia Gablinske</u>		Director Name <u>Elisa Mc Donough</u>	
Street Address <u>1081 Great Rd</u>		Street Address <u>10 Preakness Drive</u>	
City <u>Lincoln</u>	State <u>RI</u>	Zip <u>02865</u>	
Director Name <u>Joy Bolduc</u>		Director Name <u>Alexandra Pepin</u>	
Street Address <u>2 Simon Sayles Rd</u>		Street Address <u>12 Lawrence Lane</u>	
City <u>Lincoln</u>	State <u>RI</u>	Zip <u>02865</u>	
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 21 2012

Check No _____

By MME

By: _____

CR # 1121

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.

Alexandra Pepin 6/18/2012
 Signature of Officer Date

Alexandra Pepin
 Print or Type Name of Officer

treasurer
 Title of Officer