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
30364	William Winsor Parent Teacher Organization
3. State of Incorporation: RI	4. Brief description of the character of business conducted in Rhode Island: PTO events including fundraising for the William Winsor Elementary School. Parents and Faculty working together to enhance the school environment and community.

5. Principal office address	City	State	Zip
562 Putnam Pike	Greenville	RI	02828

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

President Name	Vice-President Name
Jennifer McKell	Rosann Maneca / Laurie Ratigan
Street Address: 562 Putnam Pike	Street Address: 562 Putnam Pike
City: Greenville, State: RI, Zip: 02828	City: Greenville, State: RI, Zip: 02828
Secretary Name: Tracey Morel	Treasurer Name: Colleen Kennedy
Street Address: 562 Putnam Pike	Street Address: 562 Putnam Pike
City: Greenville, State: RI, Zip: 02828	City: Greenville, State: RI, Zip: 02828

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

Director Name	Director Name
Jennifer McKell	Laurie Ratigan
Street Address: 562 Putnam Pike	Street Address: 562 Putnam Pike
City: Greenville, State: RI, Zip: 02828	City: Greenville, State: RI, Zip: 02828
Director Name: Rosann Maneca	Director Name:
Street Address: 562 Putnam Pike	Street Address:
City: Greenville, State: RI, Zip: 02828	City:, State:, Zip:

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 21 2012
Check No: By: anne
By: CK # 3365

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.

Jennifer McKell 6/17/12.
Signature of Officer Date

Jennifer McKell
Print or Type Name of Officer

President
Title of Officer

Form No. 631
Revised: 05/2012