



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Molits, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2012

Filing Period: June 1 - June 30 • **Filing Fee:** \$20.00* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**
* In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 150547		2. Name of Corporation LINCOLN TAXPAYERS ASSOCIATION			
3. State of Incorporation RHODE ISLAND		4. Corporate address in Rhode Island - Street Address 578 CHARLES STREET		City PROVIDENCE	Zip 02904
5. Foreign corporation. Enter principal office address			City	State	Zip
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island TO ADVANCE, IMPROVE & PROMOTE THE EDUCATIONAL, CIVIC, SOCIAL, COMMERCIAL, ECONOMIC INTERESTS OF THE CITIZENS OF THE TOWN OF LINCOLN AND PRESERVE OPEN LAND AND WATER.					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name RONALD STEWART M.D.			Vice President Name		
Street Address 310 TWIN RIVER ROAD			Street Address		
City LINCOLN	State RI	Zip 02865	City	State	Zip
Secretary Name			Treasurer Name ANNE BAGLINI		
Street Address			Street Address 305 TWIN RIVER ROAD		
City	State	Zip	City LINCOLN	State RI	Zip 02865
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23					
Director Name CHRISTINE STEWART			Director Name RONALD STEWART		
Street Address 310 TWIN RIVER ROAD			Street Address 310 TWIN RIVER ROAD		
City LINCOLN	State RI	Zip 02865	City LINCOLN	State RI	Zip 02865
Director Name ANNE BAGLINI			Director Name		
Street Address 305 TWIN RIVER ROAD			Street Address		
City LINCOLN	State RI	Zip 02865	City	State	Zip
9. REGISTERED AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-78					

This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

FILED

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JUN 28 2012

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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.

Anne T Baglini 6/28/12
Signature of Officer Date

ANNE T BAGLINI
Print or Type Name of Officer

TREASURER
Title of Officer

BY _____
File Date _____
Check No. _____
By: _____
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