

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.

Filling Fee: \$20.00 • FAILURE TO FILE THIS REPORT BY JULY 30 WILL DESLUT IN A \$25.00 DENALTY FEE

1. Entity ID No.	2. Exact nar	2. Exact name of the Corporation				
27924	The Little	The Little Compton Garden Club				
3. State of Incorporation		Brief description of the character of business conducted in Rhode Island garden club - education				
Rhode Island	3					
5. Principal office address 48 West Main Road			City Little Compton	State RI	Zip 02837	
6. LIST ALL OFFICERS (N	IAMES AND ADDE	ESSES) ("X" BOX FO	OR ATTACHMENT)	<u>.</u>		
President Name	······································		Vice-President Name		··· , ,	
Elizabeth Moore			Lucile Chase			
Street Address			Street Address			
696M West Main Road			383 River Road			
City	State	Zip	City	State	Zip	
Little Compton	RI	02837	Westport	MA	02790	
Secretary Name			Treasurer Name			
Barbara Trowbridge			Linda Kapstein			
Street Address			Street Address			
20P Sakonnet Point	Road		48 West Main Road			
City	State	Zip	City	State	Zip	
Little Compton	RI	02837	Little Compton	RI	02837	
7. LIST <u>ALL</u> DIRECTORS ("X" BOX FOR ATTACH		DRESSES). RHODE IS	LAND CORPORATIONS <u>MUST</u> LIS	ST NO LESS THAN	THREE (3) DIFFECTOR	
Director Name			Director Name			
Barbara Faria			Lucy O'Connor			
Street Address			Street Address			
55 Perch Rock Road	i		39 Atlantic Drive			
City	State	Zip	City	State	Zīp	
Westport	MA	02790	Little Compton	RI	02837	
Director Name			Director Name			
Jane Roberts						
Street Address			Street Address			
80B Old Main Road						
City	State	Zip	City	State	Zīp	
Little Compton	Ri	02837				
8. REGISTERED AGENT !	N RHODE ISLAND	1				
			ary of State. Changes require filing			

File Date	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.	
Check NoFILED	Linda W. Kapstein 06/28/12	
Ву:	Signature of Officer Date	
FOR SECRETARY OF STATE USE ONLY JUN 2 9 2012	Linda H. Kapstein	
790/	Print or Type Name of Officer	
Form No. 631	Treasurer	
Revised: 05/2012	Title of Officer	