



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

Fee: \$20.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Non-Profit Corporation
Annual Report**

Filing Period: June 1 - June 30

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.

ANNUAL REPORT YEAR: 2012

1. Corporate ID No. 000056986

2. Name of Corporation Friends of Jamestown Seniors, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 6 WEST STREET

City or Town: JAMESTOWN

State: RI

Zip: 02835 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

TO OPERATE AND FUND THE JAMESTOWN SENIOR CENTER TO IMPROVE THE
QUALITY OF LIFE OF SENIOR CITIZENS.

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L.
7-6-23

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
SECRETARY	BRUCE WIGTON	41 PENNSYLVANIA AV JAMESTOWN, RI 02835 USA
PRESIDENT	G.M. BRUCE LIVINGSTON	100 RACQUET ROAD JAMESTOWN, RI 02835 USA
VICE PRESIDENT	ED HOLLAND	8 HOWLAND AV JAMESTOWN, RI 02835 USA
DIRECTOR	DONALD RICHARDSON	12 DAVIS ST JAMESTOWN, RI 02835 USA
DIRECTOR	GAIL SHEAHAN	37 CLARKES VILLAGE RD JAMESTOWN, RI 02835 USA
DIRECTOR	ANNE TIGHE	4 WEST ST JAMESTOWN, RI 02835 USA
DIRECTOR	IRENE NEWSHAM	36 PIERCE AV JAMESTOWN, RI 02835 USA

8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

CHARLOTTE S. RICHARDSON 6 WEST STREET P.O. BOX 184 JAMESTOWN , RI 02835

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

Signed this 4 Day of July, 2012 at 9:49:09 AM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By G.M. BRUCE LIVINGSTON
Signature of Officer of the Corporation

☒ President or ☐ Vice President or ☐ Secretary or ☐ Assistant Secretary or
☐ Treasurer or ☐ Receiver or ☐ Trustee (check one)

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in Section 7.

Form No. 631
Revised 09/07