

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. 000026310

- 2. Name of Corporation <u>Dorcas Place Adult and Family Learning Center, Inc.</u>
- 3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 220 ELMWOOD AVENUE

City or Town: PROVIDENCE State: RI Zip: 02907 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

PROVIDE ADULT LITERACY INSTRUCTIONAL PROGRAMS & SUPPORT SERVICES FOR LOW-INCOME RESIDENTS

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Incorporator is no longer applicable; please delete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 | Address |
|------------|-----------------------------|--|
| | First, Middle, Last, Suffix | Address, City or Town, State, Zip Code, Country |
| PRESIDENT | SEAN WELCH | C/O AMICA, P.O. BOX 6008 PROVIDENCE, RI 02904 USA |
| TREASURER | SUSAN RAGANO | C/O KPMG, 50 KENNEDY PLAZA PROVIDENCE , RI 02903 USA |
| SECRETARY | HENRY CRUZ | C/O AMGEN, 40 TECHNOLOGY WAY WEST GREENWICK, RI 02817 USA |
| CFO | JOHN MORAN | C/O DORCAS PLACE PROVIDENCE, RI 02907 |
| VICE CHAIR | MARY MORSE | P.O. BOX 368 BARRINGTON, RI 02806-0368 USA |
| DIRECTOR | MICHELE ADAMO | 12 WILLIAMS STREET BARRINGTON, RI 02806 USA |
| DIRECTOR | MICHAEL ADAMO | 12 WILLIAMS WAY BARRINGTON, RI 02806 USA |
| DIRECTOR | SARAH DENBY | 106 NAYATT BARRINGTON, RI 02806 USA |
| DIRECTOR | STEPHANIE FEDERICO | 24 MESSER STREET, APT. 3 PROVIDENCE, RI 02903 USA |
| DIRECTOR | FERNADO FIALHO | C/O AMGEN 40 TECHNOLOGY WAY WEST GREENWICH, RI 02817 USA |
| DIRECTOR | GERTRUDE JONES | C/O LIFESPAN 167 POINT STREET PROVIDENCE, RI 02903 USA |
| DIRECTOR | ROBIN ANN SMITH | 2 CLYDES WAY WESTPORT , MA 02790 USA |
| DIRECTOR | JOSE VALERIO | 35 STADDEN AVE PROVIDENCE, RI 02907 USA |
| DIRECTOR | JIM YANCY | C/O MET LIFE 700 QUAKER LANE WARWICK, RI 02886 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

CAROL L. HOLMQUIST 220 ELMWOOD AVENUE PROVIDENCE, RI 02907

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

Signed this 26 Day of July, 2012 at 3:47:40 PM. 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.

| - | SEAN WELCH Signature of Officer of the Corporation | | | |
|---|--|---|--|--|
| | x 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

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