



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: 2013

1. Corporate ID No. 000126655

2. Name of Corporation SWEET BINKS RABBIT RESCUE INC.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 124 SOUTH KILLINGLY ROAD

City or Town: FOSTER

State: RI Zip: 02825 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 PROTECT AND PROMOTE THE WELFARE OF DOMESTIC RABBITS; SPECIFICALLY HOUSE OR PET RABBITS

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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 |
| TREASURER | PAMELA L HOOD               | 124 S. KILLINGLY RD<br>FOSTER, RI 02825 USA     |
| SECRETARY | BETHANY MOTT                | 44 HENRY RD<br>DANIELSON, CT 06239 USA          |

|                |                 |                                                   |
|----------------|-----------------|---------------------------------------------------|
| PRESIDENT      | PAMELA L HOOD   | 124 SOUTH KILLINGLY ROAD<br>FOSTER, RI 02825- USA |
| VICE PRESIDENT | MATTHEW L TUCCI | 124 S. KILLINGLY RD<br>FOSTER, RI 02825 USA       |
| DIRECTOR       | BETHANY MOTT    | 44 HENRY ROAD<br>DANIELSON, CT 06239 USA          |
| DIRECTOR       | PAMELA L HOOD   | 124 S. KILLINGLY RD<br>FOSTER, RI 02825 USA       |
| DIRECTOR       | MATTHEW L TUCCI | 124 S. KILLINGLY RD<br>FOSTER, RI 02825 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**

PAMELA HOOD 124 SOUTH KILLINGLY ROAD FOSTER , RI 02825-

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

**Signed this 17 Day of May, 2013 at 12:19:04 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.*

By PAMELA HOOD  
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

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