

1. Entity ID No.

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 _201

Filing Period: June 1 - June 30 · This report must be typed or printed legibly.

2. Exact name of the Corporation

Filing Fee: \$20.00 • FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No.	Exact hame of the Corporation	. TIME DEVILLE
100957	FRIENDS of the N	ATIONAL WILDLIFE REFUGES
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S. Giaic of incorporation	Support 5 matio	winess conducted in Phope Island. Id life refuges in RI:
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(busewation, educa	ALCH ACTION MAD ALCH ACTION
5. Principal office address	ED '	CHARLESTOWN State I Zip ODE 13
. LIST <u>ALL</u> OFFICERS (NAMES	AND ADDRESSES) ("X" BOX FOR AT	
President Name		Vice-President Name
RIGHTRO THIEKE		MARTINA MARASCO
Street Address 16 TAMANA.0	DR	645 PT JUDITH RD
	State Zip 02813	NARRAGANS CT State RIZID 02882
Secretary Name	000	Treasurer Name
	RISON	ROBERT KENNEY
Street Address		Street Address
11 DEBORAH	<u>\$1</u>	53 CRESTWOOD DR
NARRAGANSETT S	State PI Zip 02-882	NARRAGANSUT State RI Zip 02882
7. LIST <u>ALL</u> DIRECTORS (NAMES ("X" BOX FOR ATTACHMENT)		D CORPORATIONS <u>MUST</u> LIST NO LESS THAN THREE (3) DIRECTORS
Director Name	ιΔι ζ ζ	Director Name
	1ALEE	NACK KOLLY
Street Address	CVILLE RD	Street Address WIEKLE WAY
CHARLESTOWNS	itate Zip 02813	Newfort State J Zip 2840
Director Name		Director Name
EDWARD MORSCHAUSER		TOM TETZNER
Street Address, CASTL	E WAY	Street Address NARROW BANE
C LLA Q L TO TO LA S	tate I Zip 02813	CHARLESTOWN State Zip 02813
B. REGISTERED AGENT IN RHOD	~	CHILLESTOWN DE 1 -8001)
		f State. Changes require filing Form 641.
		ent, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee
	,	,
	FILED	Under penalty of perjury, I declare and affirm that I have examined
File Date		this report, including any accompanying schedules and statements,
Charle No.	MAN O B ODER	and that all statements contained herein are true and correct.
Check No	MAY 2 9 2013	X for the following
Ву:		Signature of Officer Date
FOR SECRETARY OF STATE US	PX. ~ W	X KICHARD THIEKE
was to see the way		Print or Type Name of Officer
orm No. 631		CHAIRMAN
evised: 05/2012		➤ Title of Officer