| RALPH MORE State of | of Rhode Island and Pro Office of the Secreta | | S Fee: \$20.00 | |
|--|--|----------------------------|-----------------------|--|
| S S S S S S S S S S S S S S S S S S S | Division Of Business 148 W. River St Providence RI 0290 (401) 222-304 | reet 4-2615 | | |
| | · · / | | | |
| 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. 000069852 | | | | |
| 2. Name of Corporation Bowen's Wharf Merchant's Association | | | | |
| 3. State of Incorporation | | | | |
| State: <u>RI</u> | | | | |
| 4. Corporate Address in Rhode Island | | | | |
| No. and Street: 13 BOWEN'S WHARF | | | | |
| City or Town: <u>NEWPOR</u> | | RI Zip: <u>02840</u> | 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 PROMOTE AND PUBLICIZE BOWENS WHARF AND TO ENCOURAGE THE GROWTH AND SUCCESS OF THE WHARF | | | | |
| | | | | |
| 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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete | | | | |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 | Addre | ss | |
| | First, Middle, Last, Suffix | Address, City or Town, Sta | te, Zip Code, Country | |
| TREASURER | DAVID FERNANDEZ | 27 BOWE NEWPORT, RI (| NS WHARF 02840 USA | |
| SECRETARY | NADIA SAULINO | 4 BOWEN NEWPORT, RI (| IS WHARF 02840 USA | |

| PRESIDENT | LORETTA ROY | 6 BOWEN'S WHARF NEWPORT, RI 02840 USA | | |
|---|--------------------|---|--|--|
| DIRECTOR | BARTLETT S. DUNBAR | 25 BRIDGE STREET NEWPORT, RI 02840 | | |
| DIRECTOR | DAVID FERNANDEZ | 27 BOWEN'S WHARF NEWPORT, RI 02840 USA | | |
| DIRECTOR | LORETTA ROY | 6 BOWEN'S WHARF NEWPORT, RI 02840 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 | | | | |
| S.M. HURLBURT 13 BOWENS WHARF NEWPORT, RI 02840 | | | | |
| 9. This report must be signed by either the President, Vice President, Secretary, Assistant | | | | |
| Secretary, Treasurer, Receiver, or Trustee. | | | | |
| Signed this 4 Day of June, 2013 at 12:42:11 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 LORETTA ROY Signature of Officer of the Corporation | | | | |
| X President or Vice President or Secretary or Assistant Secretary or | | | | |
| Treasurer orReceiver orTrustee (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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