



**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 **2013**

Filing Period: June 1 - June 30 • This report must be typed or printed legibly.  
 Filing Fee: \$20.00 • FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. <b>143122</b>		2. Exact name of the Corporation <b>Cymry's Christmas Wish</b>			
3. State of Incorporation <b>RI</b>		4. Brief description of the character of business conducted in Rhode Island <b>Fund raising to allow us to buy toys at Christmas for needy children while educating them about people with disabilities.</b>			
5. Principal office address <b>51 Friendly Road</b>		City <b>Cranston</b>		State <b>RI</b>	Zip <b>02910</b>
<b>6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/></b>					
President Name <b>Cymry Costa</b>		Vice-President Name <b>John Costa</b>			
Street Address <b>5 Ida Lane</b>		Street Address <b>51 Friendly Road</b>			
City <b>Fall River</b>	State <b>MA</b>	Zip <b>02720</b>	City <b>Cranston</b>	State <b>RI</b>	Zip <b>02910</b>
Secretary Name <b>Cheryl Costa</b>		Treasurer Name <b>David Fisher</b>			
Street Address <b>5 Ida Lane</b>		Street Address <b>51 Friendly Road</b>			
City <b>Fall River</b>	State <b>MA</b>	Zip <b>02720</b>	City <b>Cranston</b>	State <b>RI</b>	Zip <b>02910</b>
<b>7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/></b>					
Director Name <b>John Costa</b>		Director Name <b>David Fisher</b>			
Street Address <b>51 Friendly Road</b>		Street Address <b>51 Friendly Road</b>			
City <b>Cranston</b>	State <b>RI</b>	Zip <b>02910</b>	City <b>Cranston</b>	State <b>RI</b>	Zip <b>02910</b>
Director Name <b>Tammy Hoffman</b>		Director Name <b>Lisa Fisher</b>			
Street Address <b>45 Harris Avenue</b>		Street Address <b>4 Leader Street</b>			
City <b>Warwick</b>	State <b>RI</b>	Zip <b>02889</b>	City <b>Coventry</b>	State <b>RI</b>	Zip <b>02816</b>
<b>8. REGISTERED AGENT IN RHODE ISLAND</b>					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 641.					

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

File Date \_\_\_\_\_  
 Check No \_\_\_\_\_  
 By: \_\_\_\_\_

**FOR SECRETARY OF STATE USE ONLY**

Form No. 631  
 Revised: 05/2012

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

**FILED**

**JUN 04 2013**

*[Signature]* \_\_\_\_\_ *6/3/13*  
 Signature of Officer Date

**David G. Fisher**

Print or Type Name of Officer

**Treasurer**

Title of Officer

*1002*