

## 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

Entity ID No.	2. Exact name of the Corporation				
28500	<. A	11	4.		
	<u>≥7. P</u>	Ibans As	Sociation husiness conducted in Rhode is		
State of Incorporation	4. Brief desci	iption of the character of			
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Principal office address			City	State	Zip
		TOOTO (EV) DOV TOO			
LIST <u>ALL</u> OFFICERS (N	AMES AND ADDR	ESSES) ("X" BUX FUR	Vice-President Name		
			1	ovannin	•
Rory Henmer reet Address			Street Address	DV W FIRE	
130 Sunvi	ca Da		66 Halocon	Ave	
V .	State	Zip	City	State	Zip
Bristal	RI	07809	Trainton	RI	0787
cretary Name			Treasurer Name	~ . ,	
Leonard 1	?. Sanfo	rd 1(1	Edward M	Wiacel	4
eet Address			Street Address	41	
868 Hope	5+		88 Mulber	ory Rd	
ya · Li`	State	Zip	City	State RI	Zip
Pristol	PI_	02606	ワイ・くちつい		03809
.IST <u>all</u> directors ( "X" box for attach!		RESSES). RHODE ISLA	ND CORPORATIONS MUST	IST NO LESS THAN	THREE (3) DIREC
ector Name			Director Name		
Jase Da Silve			Jeffrey Howlet		
eet Address			Street Address		
31 Brooks	Farm D.		867 Hop.	5+	
2 1 1	State	Zip	City	State RT	Zip
Driste!	PI	01869	Buistol	سلمات الم	02809
ector Name	. 1		Director Name	+	
eet Address	we!		Street Address	teph eus	
859 Hope St			1 Layland Ct		
Y	State	Zip	City	State	Zip
Bristal	KI	02808	Bristol	RI	02869
REGISTERED AGENT IN					
			of State. Changes require filir		
This report must	be signed by either	the President, Vice-Pres	sident, Secretary, Assistant Secre	tary, Treasurer, Rece	eiver or Trustee
			Under penalty of perjury		
File Date			this report, including an	v accompanying sc	nequies and state

		Under penalty of perjury, I declare and affirm that I have examined		
File Date	<del>, .,,</del>	this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.		
Check No		Edward M Weach 5-29-13		
FILED FOR SECRETARY OF STATE USE ONLY		Signature of Officer  Date  Signature of Officer  Date		
orm No. 631 levised: 05/2012	JUN 0 4 2013	Title of Officer		