



**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>106041</b>		2. Exact name of the Corporation <b>JOHNSTON HISTORICAL CEMETERY NO. 74 RESTORATION COMMITTEE</b>			
3. State of Incorporation <b>RI</b>		4. Brief description of the character of business conducted in Rhode Island <b>TO RESTORE ABANDONED CEMETERY THAT WAS TARRED OVER TO USE AS A PARKING LOT AND THE MONUMENTS BROKEN</b>			
5. Principal office address <b>24 BELFIELD DRIVE</b>		City <b>JOHNSTON</b>		State <b>RI</b>	Zip <b>02919</b>
<b>6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/></b>					
President Name			Vice-President Name <b>Jean Ballirano</b>		
Street Address			Street Address <b>24 Belfield Drive</b>		
City	State	Zip	City	State	Zip
<b>Johnston</b>	<b>RI</b>	<b>02919</b>	<b>Johnston</b>	<b>RI</b>	<b>02919</b>
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
<b>7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS <u>MUST</u> LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/></b>					
Director Name <b>Janet Lemire</b>			Director Name <b>Vincent Ballirano, Sr.</b>		
Street Address <b>24 Belfield Drive</b>			Street Address <b>24 Belfield Drive</b>		
City	State	Zip	City	State	Zip
<b>Johnston</b>	<b>RI</b>	<b>02919</b>	<b>Johnston</b>	<b>RI</b>	<b>02919</b>
Director Name <b>Ann Courtemanche</b>			Director Name		
Street Address <b>48 Belfield Drive</b>			Street Address		
City	State	Zip	City	State	Zip
<b>Johnston</b>	<b>RI</b>	<b>02919</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

**FILED**

**JUN 14 2013**

File Date \_\_\_\_\_

Check No \_\_\_\_\_

By: \_\_\_\_\_

FOR SECRETARY OF STATE USE ONLY

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.

*Jean Ballirano* 5/1/2013  
 Signature of Officer Date

**Jean Ballirano**

Print or Type Name of Officer

~~President~~ *vice president*  
 Title of Officer