



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. 120689		2. Exact name of the Corporation Friends of South Ferry Church Association			
3. State of Incorporation Rhode Island		4. Brief description of the character of business conducted in Rhode Island To maintain, improve and preserve the South Ferry Church, Narragansett, RI; To manage same as an historical landmark for the benefit of the public			
5. Principal office address 1140 Reservoir Avenue		City Cranston	State RI	Zip 02920	
LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name C. Michael Hazard			Vice-President Name		
Street Address 23 Marlborough Street			Street Address		
City Boston	State MA	Zip 02116	City	State	Zip
Secretary Name Susan G. Hazard			Treasurer Name C. Michael Hazard		
Street Address 23 Marlborough Street			Street Address 23 Marlborough Street		
City Boston	State MA	Zip 02116	City Boston	State MA	Zip 02116
LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
Director Name C. Michael Hazard			Director Name Susan G. Hazard		
Street Address 23 Marlborough Street			Street Address 23 Marlborough Street		
City Boston	State MA	Zip 02116	City Boston	State MA	Zip 02116
Director Name Kenneth N. Kermes			Director Name		
Street Address 2238 Commodore Perry Highway			Street Address		
City Wakefield	State RI	Zip 02879	City	State	Zip
REGISTERED AGENT IN RHODE ISLAND					
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

File Date _____

Check No _____

By: _____

JUN 20 2013

BY 5765

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.

C. Michael Hazard 6/11/13
 Signature of Officer Date

C. Michael Hazard
 Print or Type Name of Officer

President
 Title of Officer

Continuation Page

Directors:

Michael Winter
3608 Tower Hill Road
Wakefield, RI 02879

Joseph Dowling, M.D.
151 Boston Neck Road
Narragansett, RI 02882

Kathy Mahoney
471 Ocean Road
Narragansett, RI 02882

Jean McCleary
P.O. Box 5730
Wakefield, RI 02879

Anne Richardson
30 Seagate Drive
Narragansett, RI 02882

Jane Miner
URI
South Ferry Road
Narragansett, RI 02882

Wayne K. Durfee
44 Bridgetown Road
Saunderstown, RI 02874

Bernice C. Durfee
44 Bridgetown Road
Saunderstown, RI 02874

Katharine H. Flynn
94 Woodbury Street
Providence, RI 02906

Isabel H. Goff
Post Office Box 175
Saunderstown, RI 02874

Janice Panoff
235 Bridgetown Road
Saunderstown, RI 02874

Alfred K. Potter
55 Sea Ridge Drive
Saunderstown, RI 02874

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JUN 20 2013

Clifford Renshaw
32 Edgehill Road
Providence, RI 02906

BY

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