



State of Rhode Island and Providence Plantations
Office of the Secretary of State

Fee: \$20.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**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. 000027222

2. Name of Corporation Beta Psi Alpha Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: C/O FRAT. MGRS. ASSOC.
34 LOWER COLLEGE ROAD

City or Town: KINGSTON

State: RI Zip: 02881 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

UNDERGRADUATE HOUSING

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
TREASURER	ANTHONY PALMISANO	146 ALTON BRADFORD RD. BRADFORD, RI 02808 USA
SECRETARY	ARTHUR SEPE	29 INSTITUTION LANE #18 SCITUATE, RI 02857 USA

PRESIDENT	STEPHEN M RUSSO	189 HUDSON POND ROAD WEST GREENWICH, RI 02817- USA
VICE PRESIDENT	ANTHONY PALMISANO	146 ALTON BRADFORD RD. BRADFORD, RI 02808 USA
DIRECTOR	SCOTT KRAJEWSKI	114 IROQUOIS ROAD NARRAGANSETT, RI 02882
DIRECTOR	JOSEPH G. FORMICOLA, JR.	118 POINT JUDITH ROAD NARRAGANSETT, RI 02882 USA
DIRECTOR	MICHAEL RUSSO	9 STELLA DRIVE N. PROVIDENCE, RI 02911 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

SCOTT C. TSAGARAKIS 244 SWEET ALLEN FARM ROAD SOUTH KINGSTOWN , RI 02879

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

Signed this 1 Day of July, 2013 at 10:56:29 AM. *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 ANTHONY PALMISANO
Signature of Officer of the Corporation

☐ President or ☒ Vice President or ☐ Secretary or ☐ Assistant Secretary or
☐ Treasurer or ☐ Receiver or ☐ Trustee (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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