



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:** 2014

**1. Corporate ID No.** 000487705

**2. Name of Corporation** The Municipal Heritage Group

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 26 EAST AVENUE

City or Town: NORTH PROVIDENCE State: RI Zip: 02911 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**

DEDICATED TO THE PRESERVATION OF LOCAL HERITAGE, HISTORIC SITES AND HISTORIC DOCUMENT

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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
PRESIDENT	MARGIE CARANCI	26 EAST AVE N PROVIDENCE, RI 02911 USA
TREASURER	MARGIE CARANCI	26 EAST AVE N PROVIDENCE, RI 02911 USA

SECRETARY	CAROL LACOURSE	26 EAST AVE N PROVIDENCE, RI 02911 USA
VICE PRESIDENT	MARGIE CARANCI	26 EAST AVE N PROVIDENCE, RI 02911 USA
DIRECTOR	CAROL LACOURSE	26 EAST AVENUE NORTH PROVIDENCE, RI 02911 USA
DIRECTOR	MARGIE CARANCI	26 EAST AVE N PROVIDENCE, RI 02911 USA
DIRECTOR	HEATHER CARANCI	26 EAST AVE 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**

MARGIE CARANCI 26 EAST AVENUE NORTH PROVIDENCE , RI 02911

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

**Signed this 2 Day of May, 2014 at 9:07:40 AM by the authorized person. 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 company, 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 MARGIE M. CARANCI  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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