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. 000098671

2. Name of Corporation EAST GREENWICH BUSINESS AND PROFESSIONAL WOMEN'S CLUB

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 18 VILLAGE DRIVE
City or Town: RIVERSIDE State: RI Zip: 02915 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

TO ELEVATE THE STANDARDS FOR WOMEN IN BUSINESS AND IN THE PROFESSIONS.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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 First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	DENISE SPINK-MORIN	PO BOX 716 SLATERSVILLE, RI 02876 USA
TREASURER	BARBARA ROTELLA	18 VILLAGE DRIVE RIVERSIDE, RI 02915 USA

SECRETARY	RACHAEL CHRISTIANSON	196 KNOTTY OAK RD. COVENTRY, RI 02816 USA
DIRECTOR	DEBORAH ANDERSON	16 HUTCHINS COURT EAST GREENWICH, RI 02818 USA
DIRECTOR	SHIRLEY WESSON	10 VERNDALE DRIVE EAST GREENWICH, RI 02818 USA
DIRECTOR	ANTONINA CELONA	1765 BICENTENIAL WAYY NORTH 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

BARBARA ROTELLA 18 VILLAGE DRIVE RIVERSIDE , RI 02915

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

Signed this 9 Day of May, 2014 at 1:46:42 PM 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 BARBARA ROTELLA
Signature of Authorized Person

Form No. 631
Revised 09/07