



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

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **2014**

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. 73841		2. Exact name of the Corporation North Kingstown Free Library Corporation			
3. State of Incorporation Rhode Island		4. Brief description of the character of business conducted in Rhode Island To operate a non-profit corporation exclusively for the charitable, scientific, and educational purposes of the North Kingstown Free Library			
5. Principal office address 100 Boone Street		City North Kingstown	State RI	Zip 02852	
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Richard Moore		Vice-President Name Joan Ehrhardt			
Street Address 17 Main Street		Street Address 49 Main Street			
City North Kingstown	State RI	Zip 02852	City North Kingstown	State RI	Zip 02852
Secretary Name Cyndi Desrochers		Treasurer Name Paul Sollitto			
Street Address 42 Noxon Street		Street Address 84 Cedar Glen			
City West Warwick	State RI	Zip 02893	City North Kingstown	State RI	Zip 02852
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name Thomas Sgouros		Director Name Lori Vernon			
Street Address 15 Boston Neck Road		Street Address 68 Shady Lea Road			
City North Kingstown	State RI	Zip 02852	City North Kingstown	State RI	Zip 02852
Director Name Robyn Levine		Director Name Marie Pamental			
Street Address 533 Annaquatucket Road		Street Address 471 Annaquatucket Road			
City North Kingstown	State RI	Zip 02852	City North Kingstown	State RI	Zip 02852
8. 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, duly Authorized Representative, Receiver or Trustee

File Date _____
 Check No _____
 By: _____
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FILED

MAY 14 2014
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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.

Cyndi Desrochers 5/2/14
 Signature of Officer or Authorized Representative Date

Cyndi Desrochers, Secretary

Print or Type Name of Officer or Authorized Representative