



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. 000846748

2. Name of Corporation Wiquapaug Eastern Pequot Indian Tribe

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 39 BRADFORD ROAD

City or Town: BRADFORD,

State: RI Zip: 02808 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 ORGANIZE THE WQUAPAUG EASTERN PEQUOT INDIAN TRIBE FOR THE PURPOSE OF LOCAL SELF-GOVERNMENT; TO PROMOTE EDUCATION, TO TRAIN INDIANS IN HISTORY, LANGUAGE, RELIGION, AND ARTS AND CRAFTS; TO ACQUIRE, CONSERVE, INCREASE AND DEVELOP INDIAN LANDS; TO HOLD PUBLIC POW WOVES, TO PROTECT THE CIVIL RIGHTS OF WQUAPAUG INDIANS AND THEIR DESCENDANTS, TO PROMOTE OTHER CHARACTERISTICS AND EDUCATION AND TO RAISE FUNDS AND SOLICIT DONATIONS TO ACCOMPLISH ANY OF THE ABOVE MENTIONED AND TO PERFORM OTHER FUNCTIONS PERMITTED BY LAW.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
INCORPORATOR	VINCENT J NACCARATO	96 FRANKLIN STREET WESTERLY, RI 02891 USA
DIRECTOR	BYRON O BROWN	39 BRADFORD ROAD BRADFORD, RI 02808 USA
DIRECTOR	KEITH R BROWN	805 MAIN STREET CANONCHET CLIFFS, HOPE VALLEY, RI 02832 USA
DIRECTOR	MICHAEL R WINTERS	75 PLEASANT STREET WESTERLY, RI 02891 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

BYRON O. BROWN 39 BRADFORD ROAD BRADFORD , RI 02808

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

Signed this 23 Day of May, 2014 at 6:43:46 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 BYRON O. BROWN
Signature of Authorized Person

Form No. 631
Revised 09/07