



**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. 000117386

2. Name of Corporation Tiverton Lions Club Charities, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: P.O.BOX 148

City or Town: TIVERTON

State: RI

Zip: 02878

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

SOLICIT, COLLECT AND OTHERWISE RAISE MONEY FOR CHARITABLE PURPOSES

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	ROSEMARY LOUISE BOWERS	161 FUREY AVE TIVERTON, RI 02878 USA
TREASURER	ROBERT VALCOURT	32 PIERCE AVE TIVERTON, RI 02878 USA
SECRETARY	ROSEMARY LOUISE BOWERS	161 FUREY AVE

		TIVERTON, RI 02878 USA
VICE PRESIDENT	DAWN QUIMBY	25 ALICIA CIRCLE TIVERTON, RI 02878 USA
DIRECTOR	JAMES DONNELLY	64 KENYON ROAD TIVERTON, RI 02878 USA
DIRECTOR	BARBARA PLATT	63 RUSSELL DR TIVERTON, RI 02878 USA
DIRECTOR	JEANNE TRAVERS	57 MASSACHUSETTE AVE PORTSMOUTH, RI 02871 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

JAMES A. DONNELLY 64 KENYON ROAD P.O. BOX 148 TIVERTON , RI 02878

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

Signed this 2 Day of June, 2014 at 4:05:49 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 ROSEMARY BOWERS
Signature of Authorized Person

Form No. 631
Revised 09/07

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