



**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. 000722173

2. Name of Corporation Cool Sisters Closet

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 1130 TEN ROD ROAD, SUITE E-207

City or Town: NORTH KINGSTOWN

State: RI Zip: 02852 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

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	LYNN F MORAN	1130 TEN ROD ROAD, SUITE E-207 NORTH KINGSTOWN, RI 02874 USA
TREASURER	MARGARET LANGHAMMER	14 BEAN FARM DRIVE KINGSTON, RI 02881 USA
SECRETARY	KATIE ONEIL	460 IVES ROAD

		WARWICK, RI 02818 USA
DIRECTOR	KATIE ONEIL	460 IVES ROAD WARWICK, RI 02818 USA
DIRECTOR	MARGARET LANGHAMMER	14 BEAN FARM DRIVE KINGSTON, RI 02881 USA
DIRECTOR	LYNN F MORAN	1130 TEN ROD ROAD, SUITE E-207 NORTH KINGSTOWN, RI 02874 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**

ROGER A. PETERS, ESQ. C/O ROBINSON & COLE LLP ONE FINANCIAL PLAZA, 14TH FLOOR
PROVIDENCE , RI 02903

**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 4:25:49 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 LYNN F. MORAN, PRESIDENT
Signature of Authorized Person

Form No. 631
Revised 09/07

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