



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. <u>419185</u>		2. Exact name of the Corporation <u>Friends of the Narragansett Library</u>			
3. State of Incorporation <u>RI</u>		4. Brief description of the character of business conducted in Rhode Island <u>Support public library</u>			
5. Principal office address <u>35 Kingstown Road</u>		City <u>Narragansett</u>		State <u>RI</u>	Zip <u>02882</u>
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name <u>Naomi MacDonald</u>			Vice-President Name <u>Phyllis Richards</u>		
Street Address <u>30 Kingstown Rd Apt C227</u>			Street Address <u>24 Southwest Rd</u>		
City <u>Narragansett</u>	State <u>RI</u>	Zip <u>02882</u>	City <u>Narragansett</u>	State <u>RI</u>	Zip <u>02882</u>
Secretary Name <u>Marjorie Martiresian</u>			Treasurer Name <u>Phyllis Richards</u>		
Street Address <u>430 Lloyd Ave</u>			Street Address <u>24 Southwest Rd</u>		
City <u>Providence</u>	State <u>RI</u>	Zip <u>02906</u>	City <u>Narragansett</u>	State <u>RI</u>	Zip <u>02882</u>
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS <u>MUST</u> LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name <u>Naomi MacDonald</u>			Director Name <u>Gail Shields</u>		
Street Address <u>30 Kingstown Rd Apt C227</u>			Street Address <u>37 Earles Ct.</u>		
City <u>Narragansett</u>	State <u>RI</u>	Zip <u>02882</u>	City <u>Narragansett</u>	State <u>RI</u>	Zip <u>02882</u>
Director Name <u>Phyllis Richards</u>			Director Name		
Street Address <u>24 Southwest Rd</u>			Street Address		
City <u>Narragansett</u>	State <u>RI</u>	Zip <u>02882</u>	City	State	Zip
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

FILED

File Date \_\_\_\_\_

Check No \_\_\_\_\_

By: \_\_\_\_\_ BY 173

FOR SECRETARY OF STATE USE ONLY

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.

Naomi MacDonald 5/30/14  
Signature of Officer or Authorized Representative Date

Naomi MacDonald  
Print or Type Name of Officer or Authorized Representative