

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. 000027870

2. Name of Corporation LINKS, INC. (Laymen in North Kingstown Schools)

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: <u>120 FAIRWAY DRIVE</u>

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

VOLUNTEER EDUCATIONAL SERVICES WITHIN NORTH KINGSTOWN PUBLIC SCHOOLS

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	NANCY CHAMPAGNE	99 WILLS SWAMP ROAD WEST GREENWICH, RI 02817 USA
TREASURER	TRACY WILKINSON	72 PINE TREE CIRCLE NORTH KINGSTOWN, RI 02852 USA

SECRETARY	DAVID AUBIN	66 MARINE AVENUE WARWICK, RI 02888 USA
DIRECTOR	TARA CHACE	25 WAMPANOAG CIRCLE NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	CHRISTINE KOSAK	450 WEST ALLENTON ROAD NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	JENNIFER GORMLEY	15 EBONY COURT NORTH KINGSTOWN, RI 02852 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

CHRISTINE KOSAK 100 FAIRWAY DRIVE NORTH KINGSTOWN, RI 02852

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

Signed this 3 Day of June, 2014 at 1:25:49 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 <u>NANCY CHAMPAGNE</u> Signature of Authorized Person

Form No. 631 Revised 09/07

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