



**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. 000045222

2. Name of Corporation Rhode Island Directors Association for Senior Citizens Programs, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: WESTERLY SENIOR CENTER
39 STATE STREET

City or Town: WESTERLY

State: RI Zip: 02891 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 WORK IN PURSUIT OF PROGRAM DEVELOPMENT, FUNDING AND
IMPLEMENTATION OF SENIOR SERVICES STATEWIDE

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	MARY LOU MORIN	420 MAIN STREET PAWTUCKET, RI 02860 USA
TREASURER	DON L. REYNOLDS	54 STATE STREET

		WESTERLY, RI 02891 USA
SECRETARY	ERIN MCANDREW	1214 KINGSTOWN RD WAKEFIELD, RI 02879 USA
VICE PRESIDENT	MANUEL MURRAY	56 FAIRVIEW AVENUE COVENTRY, RI 02816 USA
DIRECTOR	MARY LOU MORIN	420 MAIN STREET PAWTUCKET, RI 02860 USA
DIRECTOR	DON L. REYNOLDS JR.	54 STATE STREET WESTERLY , RI 02891 USA
DIRECTOR	MANUEL MURRAY	56 FAIRIEW AVENUE COVENTRY, RI 02816 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

DON L. REYNOLDS WESTERLY SENIOR CITIZENS CENTER 39 STATE STREET WESTERLY , RI
02891

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

Signed this 4 Day of June, 2014 at 3:21:50 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 DONALD L. REYNOLDS, JR.
Signature of Authorized Person

Form No. 631
Revised 09/07