



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>124031</u>		2. Exact name of the Corporation <u>RISWEDISH HERITAGE ASSOC.</u> <u>PO BOX 1023 EAST GREENWICH RI 02818</u>	
3. State of Incorporation <u>Rhode Island</u>		4. Brief description of the character of business conducted in Rhode Island <u>educational organization in promoting awareness of the contributions of Swedish & other Scand. peoples, the history & culture of RI, New England & North America.</u>	
5. Principal office address <u>(SEC) 5 INDIAN TRAIL-SOUTH</u>		City <u>WAKEFIELD</u>	State <u>RI</u> Zip <u>02879-1914</u>
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
President Name <u>KENDALL SVENGALIS</u>		Vice-President Name <u>NONE</u>	
Street Address <u>204 WYASSUP RD.</u>		Street Address	
City <u>N. STONINGTON</u>	State <u>CT</u>	City	State Zip
Zip <u>06359</u>			
Secretary Name <u>MERLENE MAYETTE</u>		Treasurer Name <u>PAUL SWANSON</u>	
Street Address <u>5 INDIAN TRAIL-SOUTH</u>		Street Address <u>170 CHESTNUT DR.</u>	
City <u>WAKEFIELD</u>	State <u>RI</u>	City <u>EAST GREENWICH</u>	State <u>RI</u> Zip <u>02818</u>
Zip <u>02879-1914</u>			
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
Director Name <u>KAREN KANE</u>		Director Name <u>ALVIN JOHNSON</u>	
Street Address <u>139 PINE GLEN DR.</u>		Street Address <u>8 RANDALL AVE</u>	
City <u>EAST GREENWICH</u>	State <u>RI</u>	City <u>N. PROVIDENCE</u>	State <u>RI</u> Zip <u>02911-2902</u>
Zip <u>02818</u>			
Director Name <u>ELLEN SVENGALIS</u>		Director Name <u>KAREN SODERBERG-GOMEZ</u>	
Street Address <u>204 WYASSUP RD</u>		Street Address <u>24 CRESTMONT DR.</u>	
City <u>N. STONINGTON</u>	State <u>CT</u>	City <u>CAROLINA</u>	State <u>RI</u> Zip <u>02812-1129</u>
Zip <u>06359</u>			
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

File Date _____

Check No _____

By: _____

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640

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.

Merlene Mayette 5-3-2014
Signature of Officer or Authorized Representative Date

MERLENE MAYETTE
Print or Type Name of Officer or Authorized Representative

Secretary