



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. 000486674

2. Name of Corporation LAZICKIS BIRD HOUSE & RESCUE INC

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 2141 WEST SHORE ROAD

City or Town: WARWICK

State: RI Zip: 02886 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

THE RESCUE AND REHABILITATION OF INJURED AND OR ABANDONED BIRDS

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	STEPHEN LAZICKI	681 KINGSTOWN ROAD, #216 WAKEFIELD, RI 02879 USA
TREASURER	VALERIE ASHLEY	139 MISHNOCK RD. WEST GREENWICH, RI 02817 US
SECRETARY	ERICA S. COLLINS	35 GLENWOOD CIRCLE

		WAKEFIELD, RI 02879 US
DIRECTOR	ADRIENNE THOBEN	PO BOX 362 NORTH CANTON, CT 06059 US
DIRECTOR	ANNE M BOURKE	NORTHEAST BIRD CLINIC PO BOX 308 ASHFORD, CT 06278 USA
DIRECTOR	BEVERLY PENNY	270 CASSANDRA BLV. APT. 106 TORONTO, ONTARIO, M3A1v2 CAN
DIRECTOR	CORRIE BUTLER	2141 WEST SHORE ROAD WARWICK, RI 02886 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

ERICA COLLINS 40 CHARLES STREET, E-2 WAKEFIELD , RI 02879

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

Signed this 10 Day of June, 2014 at 4:13:51 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 ERICA COLLINS
Signature of Authorized Person

Form No. 631
Revised 09/07

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