



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: 2015

1. Corporate ID No. 000132772

2. Name of Corporation Rhode Island Chamber Music Concerts

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: PO BOX 41356

City or Town: PROVIDENCE

State: RI

Zip: 02940

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 PRESENT THE FINEST CHAMBER MUSIC POSSIBLE TO THE GENERAL PUBLIC AND
TO SEEK A LARGER RHODE ISLAND AUDIENCE FOR CHAMBER MUSIC

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	JOSEPH JOAQUIM CORREIA	PO BOX 41356 ROVIDENCE, RI 02940 USA
TREASURER	SAMUEL I BEALE	PO BOX 41356 PROVIDENCE, RI 02940 USA

VICE PRESIDENT	JOAN LUSK	PO BOX 41356 PROVIDENCE, RI 02940 USA
DIRECTOR	JOAN LUSK	PO BOX 41356 PROVIDENCE, RI 02940 USA
DIRECTOR	SAMUEL I BEALE	PO BOX 41356 PROVIDENCE, RI 02940 USA
DIRECTOR	JOSEPH JOAQUIM CORREIA	PO BOX 41356 PROVIDENCE, RI 02940 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

SAMUEL I. BEALE 28 DEER RUN HOPE , RI 02831

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

Signed this 14 Day of June, 2014 at 11:41:52 AM 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 SAMUEL I. BEALE
Signature of Authorized Person

Form No. 631
Revised 09/07