



**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. 000027528

2. Name of Corporation Kickemuit River Council

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 17 CHACE AVENUE

City or Town: WARREN

State: RI

Zip: 02885

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 PROTECT, PRESERVE, AND PROMOTE THE KICKEMUIT RIVER AND ITS
TRIBUTARIES

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	DAVID URBAN	47 LAUREL LANE WARREN, RI 02885 USA
TREASURER	STEVEN ROTH	1 RIVERVIEW AVE BRISTOL, RI 02809 USA

VICE PRESIDENT	ANN MORRILL	90 DEXTERDALE RD PROVIDENCE, RI 02906 USA
DIRECTOR	DAVID URBAN	47 LAUREL LANE WARREN, RI 02885 USA
DIRECTOR	ANN MORRILL	90 DEXTERDAL RD PROVIDENCE, RI 02906 USA
DIRECTOR	STEVEN ROTH	1 RIVERVIEW AVE BRISTOL, RI 02809 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**

JANE HARRISON CHACE AVENUE WARREN , RI 02885

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

Signed this 16 Day of June, 2014 at 10:30:52 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 STEVEN ROTH
Signature of Authorized Person

Form No. 631
Revised 09/07