



**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>102953</u>		2. Exact name of the Corporation <u>Green Party of Rhode Island</u>	
3. State of Incorporation <u>Rhode Island</u>		4. Brief description of the character of business conducted in Rhode Island <u>Political Party</u>	
5. Principal office address <u>37 6th St</u>		City <u>providence</u>	State <u>RI</u>
		Zip <u>02906</u>	
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
President Name <u>Tony Affigne</u>		Vice President Name <u>David Fisher</u>	
Street Address <u>14 Elmcrest Ave.</u>		Street Address <u>238 Second Ave</u>	
City <u>providence</u>	State <u>RI</u>	City <u>Woonsocket</u>	State <u>RI</u>
Zip <u>02908</u>		Zip <u>02895</u>	
Secretary Name <u>Kathleen Bourke</u>		Treasurer Name <u>Greg Bennett</u>	
Street Address <u>37 6th St</u>		Street Address <u>37 6th St</u>	
City <u>providence</u>	State <u>RI</u>	City <u>providence</u>	State <u>RI</u>
Zip <u>02906</u>		Zip <u>02906</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>Nick Schmuder</u>		Director Name <u>Donna Schmuder</u>	
Street Address <u>55 Ingersoll Ave</u>		Street Address <u>55 Ingersoll Ave</u>	
City <u>Warrwick</u>	State <u>RI</u>	City <u>Warrwick</u>	State <u>RI</u>
Zip <u>02886</u>		Zip <u>02886</u>	
Director Name <u>John Gallagher</u>		Director Name <u>Richard Cotteriere</u>	
Street Address <u>15 Sparrow St.</u>		Street Address <u>29 Vernon Ave</u>	
City <u>Providence</u>	State <u>RI</u>	City <u>Newport</u>	State <u>RI</u>
Zip <u>02908</u>		Zip <u>02840</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

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.

Greg Bennett  
 Signature of Officer or Authorized Representative Date  
Greg Bennett  
 Print or Type Name of Officer or Authorized Representative

File Date \_\_\_\_\_  
 Check No \_\_\_\_\_  
 By: \_\_\_\_\_ JUN 23 2014  
 FOR SECRETARY OF STATE USE ONLY  
 By: 226915  
 KM