



**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. 000796735

2. Name of Corporation Providence Speaking Society

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 49 WEYBOSSET STREET

City or Town: PROVIDENCE

State: RI Zip: 02903 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 PROMOTE THE EXCHANGE OF IDEAS AND THE PRACTICE OF PUBLIC SPEAKING.
TO HOST EVENTS AND CONFERENCES FEATURING PUBLIC SPEAKING AS A PRIMARY
FORM OF ENTERTAINMENT AND EDUCATION

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	MICHAEL R GAZDACKO	78 HARRISON STREET PROVIDENCE, RI 02909 USA
TREASURER	PETER HAAS	166 VALLEY STREET, UNIT 6M417

		PROVIDENCE, RI 02909 USA
SECRETARY	CAROLINE MAILLOUX	22 MURRAY CIRCLE RAYNHAM, MA 02767 USA
DIRECTOR	TOBIAS LEDERBERG	49 WEYBOSSET STREET PROVIDENCE, RI 02903 USA
DIRECTOR	JIM NELLIS	48 HUDSON STREET, APT 1 PROVIDENCE, RI 02909 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**

PETER HAAS 42 RICE STREET PROVIDENCE , RI 02907

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

Signed this 27 Day of December, 2014 at 12:01:03 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 MICHAEL GAZDACKO
Signature of Authorized Person

Form No. 631
Revised 09/07

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