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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 2015

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.	2. Exact name of the Corporation
121521	**Anchor Arts, Inc.**
3. State of Incorporation	4. Brief description of the character of business conducted in Rhode Island
RI	**Non-Profit organization dedicated to developing and producing multi-media productions featuring disabled persons in able bodied roles.**

5. Principal office address	City	State	Zip
92 Glendale Drive	**West Warwick**	**RI**	**02871**

6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐

President Name			Vice-President Name		
Richard Cunha			**Maureen Barnes**		
Street Address			Street Address		
253 Wilbur Avenue			**255 West 43rd St.**		
City / State / Zip			City / State / Zip		
Swansea	**MA**	**02777**	**New York**	**NY**	**10023**
Secretary Name			Treasurer Name		
Cassandra Batson			**Cassandra Batson**		
Street Address			Street Address		
P.O. Box 168			**P.O. Box 168**		
City / State / Zip			City / State / Zip		
New Haven	**WV**	**25265**	**New Haven**	**WV**	**25265**

7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) ☐

Director Name			Director Name		
Richard Cunha			**Cassandra Batson**		
Street Address			Street Address		
253 Wilbur Avenue			**P.O. Box 168**		
City / State / Zip			City / State / Zip		
Swansea	**MA**	**02777**	**New Haven**	**WV**	**25265**
Director Name			Director Name		
Maureen Barnes					
Street Address			Street Address		
255 West 43rd St.					
City / State / Zip			City / State / Zip		
New York	**NY**	**10023**			

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

2015 MAY -4 PM 2:08 SECRETARY OF STATE CORPORATIONS DIV

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

FILED
MAY 04 2015
BY CR 248244
2:11

File Date _____
Check No _____
By: _____
FOR SECRETARY OF STATE USE ONLY

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.

4/30/15
Signature of Officer or Authorized Representative — Date

Richard Cunha
Print or Type Name of Officer or Authorized Representative

Form No. 631
Revised: 04/2014
120519-2-1010422