



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. 000030124

2. Name of Corporation Rhode Island Federation of Square and Round Dance Clubs

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 10 CROSSING DRIVE
APT. 103

City or Town: CUMBERLAND State: RI Zip: 02864 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 AND PRESERVE SQUARE AND ROUND DANCING IN RHODE ISLAND

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	DONALD DAVIS	8 ORRVILLE DRIVE MIDDLETOWN, RI 02842 USA
TREASURER	LISA BREault	10 CROSSING DR CUMBERLAND, RI 02864 USA

SECRETARY	JOAN LEIN	6342 FLAT RIVER RD GREENE, RI 02887 USA
VICE PRESIDENT	LYNNE JASON	183 DENNISON HILL RD. N.STONINGTON, CT 06359 USA
DIRECTOR	ERNEST LEIN	6342 FLAT RIVER RD GREENE, RI 02887 USA
DIRECTOR	ERIC SJOBLOM	42 FANNING LANE GREENVILLE, RI 02828 USA
DIRECTOR	RON JASON	183 DENNISON HILL RD N STONINGTON, CT 06359 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

LISA BREault 10 CROSSING DRIVE APT 103 CUMBERLAND , RI 02864

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

Signed this 12 Day of May, 2015 at 5:27:29 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 LISA BREault, TREASURER
Signature of Authorized Person

Form No. 631
Revised 09/07

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