



**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. 000038555

2. Name of Corporation South County Tourism Council, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 4808 TOWER HILL ROAD

SUITE 101

City or Town: WAKEFIELD

State: RI Zip: 02879 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

TOURISM PROMOTION

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	MYRNA GEORGE	4808 TOWER HILL ROAD WAKEFIELD, RI 02879- USA
DIRECTOR	FRANK PROSNITZ	350 RED CHIMNEY DRIVE WARWICK, RI 02886 USA

DIRECTOR	ERIC POSTEMSKY	1 LINCOLN ALMOND PLAZA KINGSTON, RI 02881 USA
DIRECTOR	DAVID CAPRIO	1 CENTER PLACE PROVIDENCE, RI 02903 USA
DIRECTOR	DENISE MARCEY	32 HIGH STREET WESTERLY, RI 02891 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**

MYRNA GEORGE 4808 TOWER HILL ROAD WAKEFIELD , RI 02879

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

Signed this 1 Day of June, 2015 at 10:41:07 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 MYRNA C. GEORGE
Signature of Authorized Person

Form No. 631
Revised 09/07

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