

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. 000793836

2. Name of Corporation Cumberland Holiday Basket Program, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 247 HARRIET LANE

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 ALLEVIATE HUNGER DURING THE HOLIDAY SEASONS IN THE COMMUNITY OF CUMBERLAND RHODE ISLAND BY PROVIDING CHARITABLE HOLIDAY FOOD BASKETS TO LOW INCOME FAMILIES WITHIN THE COMMUNITY

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
SECRETARY	BRIAN HART	21 BELLINGHAM RD. BLACKSTONE, MA 01504 USA
TREASURER	DEBRA COIA	10 MORNING WAY

		CUMBERLAND, RI 02864 USA
PRESIDENT	JOHN JOHNSON	247 HARRIET LANE CUMBERLAND, RI 02864 USA
DIRECTOR	JOHN JOHNSON	247 HARRIET LANE CUMBERLAND, RI 02864 USA
DIRECTOR	BRIAN HART	21 BELLINGHAM RD. BLACKSTONE, MA 01504 USA
DIRECTOR	DEBRA COIA	10 MORNING WAY CUMBERLAND, RI 02864 USA
VICE PRESIDENT	MELINDA ACOSTA	9A GASKIN LANE CUMBERLAND, RI 02864 USA
DIRECTOR	MELINDA ACOSTA	9A GASKIN LANE CUMBERLAND, RI 02864 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

JOHN E. JOHNSON 18 DANECROFT AVENUE GREENVILLE, RI 02828

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

Signed this 9 Day of June, 2015 at 2:09:05 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 <u>JOHN JOHNSON</u>

Signature of Authorized Person

Form No. 631 Revised 09/07

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