



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. 000141443

2. Name of Corporation The Trustees of Obadiah Brown's Benevolent Fund

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 554 WAYLAND AVENUE

City or Town: PROVIDENCE

State: RI Zip: 02906 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

MANAGEMENT OF THE OBADIAH BROWN BENEVOLENT FUND IN SUPPORT OF THE SOCIETY OF FRIENDS

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
TREASURER	PAUL C MANGELSDORF III	545 TROWBROOK ROAD ATLANTA, GA 30350 USA
SECRETARY	CAROL SMITH	147 ELTON STREET PROVIDENCE, RI 02906 USA

PRESIDENT	HUGH GELCH	20 AUBURN AVENUE AUBURNDALE, MA 02466 USA
DIRECTOR	DEANA CHASE	1132 MAIN ROAD WESTPORT, MA 02790 USA
DIRECTOR	RALPH B GENTILE	108 PINE STREET ANDOVER, MA 01810 USA
DIRECTOR	SUSAN REILLY	9 GREENWOOD MOUNTAIN ROAD MINOT, ME 04258 USA
DIRECTOR	PHEBE MCCOSKER	268 HOUGHTON HILL ROAD THETFORD, VT 05074 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**

PAMELA DAHLBERG 554 WAYLAND AVENUE PROVIDENCE , RI 02906

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

Signed this 14 Day of June, 2015 at 5:11:58 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 PAUL C. MANGELSDORF III
Signature of Authorized Person

Form No. 631
Revised 09/07

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