



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. 793371		2. Exact name of the Corporation 60 King Street, Inc.			
3. State of Incorporation Rhode Island		4. Brief description of the character of business conducted in Rhode Island Holding title to property, collecting income and turning over the full amount less expenses to an organization which itself is exempt under IRC 501 (A) (1)			
5. Principal office address 55 Dorrance Street, Suite 200		City Providence	State RI	Zip 02903	
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☒					
President Name Frank Shea		Vice-President Name			
Street Address 66 Chafee Street		Street Address			
City Providence	State RI	Zip 02909	City	State	Zip
Secretary Name John M. Kelly		Treasurer Name John M. Kelly			
Street Address 1000 Eddy Street		Street Address 1000 Eddy Street			
City Providence	State RI	Zip 02905	City Providence	State RI	Zip 02905
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) ☒					
Director Name Melanie Cahill		Director Name Mary L. Fasano			
Street Address 66 Chaffee Street		Street Address 66 Chaffee Street			
City Providence	State RI	Zip 02909	City Providence	State RI	Zip 02909
Director Name John R. Galvin		Director Name Paul Moran			
Street Address 1000 Eddy Street		Street Address 1000 Eddy Street			
City Providence	State RI	Zip 02905	City Providence	State RI	Zip 02905
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.					

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

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

FILED
JUN 17 2015

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.

Signature of Officer or Authorized Representative John M. Kelly Date 6/12/15

Print or Type Name of Officer or Authorized Representative John M. Kelly, Treasurer

Marisa DeVine

From: Gail Macera
Sent: Monday, June 08, 2015 11:45 AM
To: Marisa DeVine
Subject: 60 King Street, Inc. 2015 Board of Directors

Hi Marisa:
Information you requested:

Melanie Cahill
66 Chaffee Street
Providence, RI 02909

Mary L. Fasano
66 Chaffee Street
Providence, RI 02909

John R. Galvin, C.P.A.
1000 Eddy Street
Providence, RI 02905

Frank Shea
66 Chaffee Street
Providence, RI 02909

Paul P. Moran
1000 Eddy Street
Providence, RI 02905

Bill White
1000 Eddy Street
Providence, RI 02905

Gail A. Macera | Executive Assistant to the President

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