



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. <u>27990</u>		2. Exact name of the Corporation <u>Burrillville Historical & Preservation Society</u>	
3. State of Incorporation <u>Rhode Island</u>		4. Brief description of the character of business conducted in Rhode Island <u>Historical Preservation</u>	
5. Principal office address <u>16 Laurel Hill Ave, PO Box 93</u>		City <u>Pascoag</u>	State <u>RI</u> Zip <u>02859</u>
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
President Name <u>Betty Mencucci</u>		Vice-President Name <u>Denice Mitchell</u>	
Street Address <u>1777 Victory Highway</u>		Street Address <u>41 Merrimac Road</u>	
City <u>Glendale</u>	State <u>RI</u>	Zip <u>02826</u>	City <u>North Smithfield</u> State <u>RI</u> Zip <u>02896</u>
Secretary Name <u>Rose Shaw</u>		Treasurer Name <u>Mabel Hopkins</u>	
Street Address <u>725 Wallum Lake Road</u>		Street Address <u>175 Cherry Farm Road</u>	
City <u>Pascoag</u>	State <u>RI</u>	Zip <u>02859</u>	City <u>Harrisville</u> State <u>RI</u> Zip <u>02830</u>
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
Director Name <u>Nancy Greene</u>		Director Name <u>Shirley Richard</u>	
Street Address <u>PO Box 824</u>		Street Address <u>611 South Main St.</u>	
City <u>Douglas</u>	State <u>MA</u>	Zip <u>01516</u>	City <u>Pascoag</u> State <u>RI</u> Zip <u>02859</u>
Director Name <u>John Shaw</u>		Director Name	
Street Address <u>725 Wallum Lake Road</u>		Street Address	
City <u>Pascoag</u>	State <u>RI</u>	Zip <u>02859</u>	City State Zip
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: _____

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BY 1049

FILED

JUN 24 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.

Betty Mencucci June 21, 2015
 Signature of Officer or Authorized Representative Date

BETTY MENCUCCI
 Print or Type Name of Officer or Authorized Representative