



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. 000110529

2. Name of Corporation Rhode Island Labor History Society

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: P.O. BOX 962
City or Town: PROVIDENCE State: RI Zip: 02901 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 167 PINECREST DRIVE
City or Town: NORTH KINGSTOWN State: RI Zip: 02852 Country: UNI

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

THE PRESERVATION OF WORKING CLASS AND IMMIGRANT MATERIALS AND THE
POPULAR DISSEMINATION OF THAT HISTORY.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	JAMES PARISI	19 BIRCHTREE DR JOHNSTONN, RI 02919 USA
TREASURER	MATTHEW DITOMASSO	167 PINECREST DR NORTH KINGSTOWN, RI 02852 USA

VICE PRESIDENT	LINDA LACLAIR	147 PROSPECT STREET PROVIDENCE, RI 02906 USA
DIRECTOR	SCOTT MOLLOY	550 USQUEPAUGH RD WEST KINGSTON, RI 02892 USA
DIRECTOR	CATHERINE COLLETTE	5539 POST ROAD CHARLESTOWN, RI 02813 USA
DIRECTOR	PATRICK BRADY	106 CUMBERLAND AVE SOUTH ATTLEBORO, MA 02703 USA
DIRECTOR	VICKI GREIG	85 ALGER AVE PROVIDENCE, RI 02907 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

SCOTT MOLLOY HART HOUSE, URI 34 UPPER COLLEGE ROAD KINGSTON , RI 02881

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

Signed this 29 Day of June, 2015 at 8:41:44 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 MATTHEW H DITOMASSO
Signature of Authorized Person

Form No. 631
Revised 09/07

© 2007 - 2015 State of Rhode Island and Providence Plantations
All Rights Reserved