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. 000516836

2. Name of Corporation Hopkins Hill Parent Teacher Association

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 95 JOHNSTON BLVD
City or Town: COVENTRY State: RI Zip: 02816 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

PROMOTE WELFARE OF CHILDREN AND YOUTH IN HOME, SCHOOL AND 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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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 First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
TREASURER	DOROTHY DETONNANCOURT	23 OLD MISHNOCK HWY COVENTRY, RI 02816 USA
SECRETARY	MARY KLEIN	8 SYCAMORE DRIVE COVENTRY, RI 02816 USA

VICE PRESIDENT	RICHARD MOSCHETTI	4 HAYWOOD ROAD COVENTRY, RI 02816 USA
PRESIDENT	RICHARD PARENT	4 HILLTOP AVENUE COVENTRY, RI 02816 USA
DIRECTOR	AMY WOLF	36 MAUDE AVE COVENTRY, RI 02816 USA
DIRECTOR	ROBIN FERREIRA	3 ADA COURT COVENTRY, RI 02816 USA
DIRECTOR	STACEY BARRY	4 GARFIELD COVENTRY, RI 02816 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

LISA JAMES 28 KING STREET COVENTRY , RI 02816

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

Signed this 30 Day of June, 2015 at 2:28:59 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 DOROTHY DETONNANCOURT
Signature of Authorized Person

Form No. 631
Revised 09/07

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