



**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. 000118318

2. Name of Corporation ST. ANN ARTS AND CULTURAL CENTER

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 84 CUMBERLAND STREET

City or Town: WOONSOCKET

State: RI Zip: 02895 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

TO PRESERVE AND RESTORE THE PREMISES IN WOONSOCKET, RI FORMERLY KNOWN AS ST. ANN ROMAN CATHOLIC CHURCH

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	WALTER RATHBUN	10 GREYSTONE AVENUE NORTH PROVIDENCE, RI 02911 USA
TREASURER	DOMINIQUE E DOIRON	10 GREY STONE NORTH PROVIDENCE, RI 02911 USA

DIRECTOR	CLAIRE BARRETTE	149 CAPWELL AVE WOONSOCKET, RI 02895 USA
DIRECTOR	ANGELA RONDEAU	63 CHALAPA AVE WOONSOCKET, RI 02895 USA
DIRECTOR	JEANNINE AUGER	650 ALDRICH STREET UXBRIDGE, MA 01569 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**

DOMINIQUE DOIRON 84 CUMBERLAND STREET P.O. BOX 79 WOONSOCKET , RI 02895

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

Signed this 9 Day of July, 2015 at 1:22:54 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 WALTER RATHBUN
Signature of Authorized Person

Form No. 631
Revised 09/07

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