



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.** 000192329

**2. Name of Corporation** North Smithfield Robotics Club

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 101 BRENTWOOD DRIVE

City or Town: NORTH SMITHFIELD

State: RI Zip: 02896 Country: USA

**5. Foreign Corporation. Enter Principal Office Address**

No. and Street: 101 BRENTWOOD DRIVE

City or Town: NORTH SMITHFIELD State: RI Zip: 02896 Country: UNI

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

TO PROVIDE CLASSES AND WORKSHOPS FOR CHILDREN IN ROBOTICS

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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	MARY ELLEN ROSE	345 IRON MINE HILL ROAD NORTH SMITHFIELD, RI 02896 USA
PRESIDENT	JANICE HORN	101 BRENTWOOD DRIVE NORTH SMITHFIELD, RI 02896 USA
VICE PRESIDENT	ANNE-MARIE GIRARD	77 URRICO AVE

DIRECTOR	JANICE HORN	NORTH SMITHFIELD, RI 02896 USA 101 BRENTWOOD DRIVE NORTH SMITHFIELD, RI 02896 USA
DIRECTOR	ANNE-MARIE GIRARD	77 URRICO AVE NORTH SMITHFIELD, RI 02896 USA
DIRECTOR	MARY ELLEN ROSE	345 IRON MINE HILL ROAD NORTH SMITHFIELD, RI 02896 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**

JANICE HORN 101 BRENTWOOD DRIVE NORTH SMITHFIELD , RI 02896

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

**Signed this 22 Day of August, 2015 at 6:11:18 AM 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 JANICE HORN  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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