

## 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 2007

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.

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1. Entity ID No.	I	ne of the Corporation					
81771	CLEAN	CLEAN WATER FUND					
3. State of Incorporation	4. Brief desc	cription of the characte	r of business conducted in Rhode Is	sland			
			ırch and education organiz			blic	
DC	interest	on issues relatin	g to water, waste, toxins, a	nd natural reso	urces.		
5. Principal office address			City	State	Zip		
741 Westminster St			Providence	RI	02903		
LIST ALL OFFICERS (	NAMES AND ADDR	ESSES) ("X" BOX FO	OR ATTACHMENT)		海星排星表达		
President Name			Vice-President Name				
Peter Lockwood							
Street Address			Street Address				
One Thomas Circle I	NW						
City	State	Zip	City	State	Zip		
Washington	DC	20005					
Secretary Name			Treasurer Name				
Dianne Akabli				<del></del>	<del>*</del>		
Street Address			Street Address				
38875 Harper Ave							
City	State	Zip	City	State	Zip		
Clinton Twp	MI	48036					
		RESSES), RHODE IS	SLAND CORPORATIONS <u>MUST</u> L	IST NO LESS THAN	I THREE (3) DIR	ECTORS	
("X" BOX FOR ATTACH	MENT)				· •		
Director Name			Director Name William Fontenot			•	
Polly Hoppin			Street Address			1, 117,	
Street Address				Street Address 632 Drehr Ave			
9 Warren Square		177:		State	Zip w	<del>- 공중</del>	
Čity	State MA	Zip <b>02130</b>	City Baton Rouge	LA	70806	-1-<	
Jamaica Plain	MA	02130	Director Name	<u> </u>		<u> </u>	
Director Name	ramonto		Director Name Kathleen E Aterno				
Yvette Martinez Bracamonte Street Address			Street Address ** >>				
5015 Eagle Rock Blvd			20075 Harrar Avo			< =	
City	State	Zip	City	State	Zip		
Los Angeles	CA	90041	Clinton Twp	MI	48036		
REGISTERED AGENT I						e, Green	
			tary of State. Changes require fill	na Form 641.			
					Penresentative :	Raceivar	
T	by either the Presid	ent, vice-President, Se	ecretary, Assistant Secretary, Treasu	arer, daily Addition280	i iopieseillauve, i	.cceivei	
or Trustee							
			Under penalty of perjury				
File Date			this report, including ar and that all statements				
tracaulia de preside		<b>6</b> -11 L	/ /	contained herein ai	e true and corre		
Check No	<del>- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1</del>	FILE		S Ada	3018	2015	
Bv:			Taylo	_ Willia	<i></i>		
SHIP CAREER STATE		AUG <b>31</b>	2015 Signature of Officer or Au	ithorized Representa	tive D	ate	
FOR SECRETARY OF S	TATE USE ONLY	Fi.					
		ا كالألا يعد	1:400 Kathleen E Aterno	-Corporate Assi	stant Secret	ary	

Print or Type Name of Officer or Authorized Representative

Form No. 631 Revised: 04/2014