

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. 000027913

2. Name of Corporation <u>GLOCESTER MANTON FREE PUBLIC LIBRARY OF GLOCESTER</u>, RHODE ISLAND

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 1137 PUTNAM PIKE

City or Town: CHEPACHET State: RI Zip: 02814 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

A LENDING LIBRARY

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	KATHLEEN WINSOR	169 DOUGLAS HOOK ROAD CHEPACHET, RI 02814 USA
TREASURER	FRANCIS FLYNN	145 DOUGLAS HOOK RD CHEPACHET, RI 02814 USA

SECRETARY	CYNTHIA CHACE	54 CHOPMIST HILL RD CHEPACHET, RI 02814 USA
DIRECTOR	JEANNE SHERMAN	1733 SNAKE HILL ROAD CHEPACHET, RI 02814
VICE PRESIDENT	JOAN WALSH	1241 PUTNAM PIKE CHEPACHET, RI 02814 USA
DIRECTOR	MELINDA RYAN	25 DOUGLAS HOOK RD CHEPACHET, RI 02814 USA
DIRECTOR	KIM BELLEAVOINE	1196 SPRING GROVE RD CHEPACHET, RI 02814 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

PHYLLIS STEGER MAIN STREET CHEPACHET, RI 02814

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

Signed this 21 Day of December, 2015 at 2:54:53 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 GAYLE WOLSTENHOLME Signature of Authorized Person

Form No. 631 Revised 09/07

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