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 2015

**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.**

| 1. Entity ID No. | 2. Exact name of the Corporation |
|---|---|
| 27587 | Kiwanis Club of Greater Providence, Rhode Island |
| 3. State of Incorporation | 4. Brief description of the character of business conducted in Rhode Island |
| Rhode Island | Community Service |

| 5. Principal office address | City | State | Zip |
|---|---|---|---|
| 17 Russell Drive | N. Kingstown | RI | 02852-6227 |

**6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT)** ☐

| President Name | Vice-President Name |
|---|---|
| Jim Roehm | Sandra Levine |
| Street Address | Street Address |
| 17 Russell Drive | 700 Shore Drive, #610 |
| City / State / Zip | City / State / Zip |
| N. Kingstown / RI / 02852-6227 | Fall River / MA / 02721 |
| Secretary Name | Treasurer Name |
| John Pope | John Pope |
| Street Address | Street Address |
| 6 Canochet Drive | 6 Canochet Drive |
| City / State / Zip | City / State / Zip |
| Portsmouth / RI / 02878 | Portsmouth / RI / 02878 |

**7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT)** ☐

| Director Name | Director Name |
|---|---|
| Jim Roehm | Spencer Reid |
| Street Address | Street Address |
| 17 Russell Drive | 48 Red Maple Terrace |
| City / State / Zip | City / State / Zip |
| N. Kingstown / RI / 02852-6227 | N. Kinstown / RI / 02852 |
| Director Name | Director Name |
| John Pope | Trudy Jessel |
| Street Address | Street Address |
| 6 Canochet Drive | 66 East Hill Road |
| City / State / Zip | City / State / Zip |
| Portsmouth / RI / 02878 | Cranston / RI / 02920 |

**8. REGISTERED AGENT IN RHODE ISLAND**

**This information is currently of record in the Office of the Secretary of State. Changes require filing Form 641.**

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

**File Date** _____

**Check #** _____

**By:** _____

**FOR SECRETARY OF STATE USE ONLY**

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SECRETARY OF STATE
CORPORATIONS DIV

FILED
MAR 02 2016
By 269151
A.A. 1:03 p.m.

**Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.**

James A. Roehm 3/2/2016
Signature of Officer or Authorized Representative — Date

**Jim Roehm, President**
Print or Type Name of Officer or Authorized Representative

Form No. 631
Revised: 04/2014