



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 2011

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.<br><b>27587</b>   |                    | 2. Exact name of the Corporation<br><b>Kiwanis Club of Greater Providence, Rhode Island</b>             |                             |                    |                          |
| 3. State of Incorporation<br><b>Rhode Island</b>   |                    | 4. Brief description of the character of business conducted in Rhode Island<br><b>Community Service</b> |                             |                    |                          |
| 5. Principal office address<br><b>17 Russell Drive</b>   |                    | City<br><b>N. Kingstown</b>   |                             | State<br><b>RI</b> | Zip<br><b>02852-6227</b> |
| 6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>   |                    |   |                             |                    |                          |
| President Name<br><b>Jim Roehm</b>   |                    | Vice-President Name<br><b>Sandra Levine</b>   |                             |                    |                          |
| Street Address<br><b>17 Russell Drive</b>  |                    | Street Address<br><b>700 Shore Drive, #610</b>  |                             |                    |                          |
| City<br><b>N. Kingstown</b>  | State<br><b>RI</b> | Zip<br><b>02852-6227</b>  | City<br><b>Fall River</b>   | State<br><b>MA</b> | Zip<br><b>02721</b>      |
| Secretary Name<br><b>John Pope</b>   |                    | Treasurer Name<br><b>John Pope</b>  |                             |                    |                          |
| Street Address<br><b>6 Canochet Drive</b>  |                    | Street Address<br><b>6 Canochet Drive</b>   |                             |                    |                          |
| City<br><b>Portsmouth</b>  | State<br><b>RI</b> | Zip<br><b>02878</b>   | City<br><b>Portsmouth</b>   | State<br><b>RI</b> | Zip<br><b>02878</b>      |
| 7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS <b>MUST</b> LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> |                    |   |                             |                    |                          |
| Director Name<br><b>Jim Roehm</b>  |                    | Director Name<br><b>Spencer Reid</b>  |                             |                    |                          |
| Street Address<br><b>17 Russell Drive</b>  |                    | Street Address<br><b>48 Red Maple Terrace</b>   |                             |                    |                          |
| City<br><b>N. Kingstown</b>  | State<br><b>RI</b> | Zip<br><b>02852-6227</b>  | City<br><b>N. Kingstown</b> | State<br><b>RI</b> | Zip<br><b>02852</b>      |
| Director Name<br><b>John Pope</b>  |                    | Director Name<br><b>Trudy Jessel</b>  |                             |                    |                          |
| Street Address<br><b>6 Canochet Drive</b>  |                    | Street Address<br><b>66 East Hill Road</b>  |                             |                    |                          |
| City<br><b>Portsmouth</b>  | State<br><b>RI</b> | Zip<br><b>02878</b>   | City<br><b>Cranston</b>     | State<br><b>RI</b> | Zip<br><b>02920</b>      |
| 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 No. \_\_\_\_\_

By: **2016 MAR -2 PM 12:53**

FOR SECRETARY OF STATE ONLY

SECRETARY OF STATE

Form No. 631  
Revised: 04/2014

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.

FILED

MAR 02 2016

By **269157**

**A.A. 12:58 p.m.**

**James A. Roehm**

Signature of Officer or Authorized Representative

**3/2/2016**

Date

**Jim Roehm, President**

Print or Type Name of Officer or Authorized Representative