



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 2016

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. <u>26083</u>		2. Exact name of the Corporation <u>HAMILTON HOUSE</u>			
3. State of Incorporation <u>RI</u>		4. Brief description of the character of business conducted in Rhode Island <u>SENIOR ADULT LEARNING EXCHANGE COMMUNITY CENTER</u>			
5. Principal office address <u>276 ANGELL ST.</u>		City <u>PROVIDENCE</u>	State <u>RI</u>	Zip <u>02906</u>	
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name <u>JOAN MERRET</u>			Vice-President Name <u>CATHY LAWSON</u>		
Street Address <u>4 FAIR OAKS DRIVE</u>			Street Address <u>21 MORRA WAY</u>		
City <u>LINCOLN</u>	State <u>RI</u>	Zip <u>02865</u>	City <u>RUMFORD</u>	State <u>RI</u>	Zip <u>02916</u>
Secretary Name <u>KATHERINE SHERIDAN</u>			Treasurer Name <u>BETTY PRAIRE</u>		
Street Address <u>1363 SMITH ST</u>			Street Address <u>61 LOWDEN ST.</u>		
City <u>NO. PROV</u>	State <u>RI</u>	Zip <u>02911</u>	City <u>PAWTUCKET</u>	State <u>RI</u>	Zip <u>02860</u>
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS (*X* BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name <u>MARGO CHIAPPARELLI</u>			Director Name <u>JEANNE WATERS</u>		
Street Address <u>65 LAUREL AVE</u>			Street Address <u>157 PLEASANT ST</u>		
City <u>PROVIDENCE</u>	State <u>RI</u>	Zip <u>02706</u>	City <u>RUMFORD</u>	State <u>RI</u>	Zip <u>02916</u>
Director Name <u>FRANK MCGOWABLE</u>			Director Name <u>MARILYN EDWARDS</u>		
Street Address <u>54 SIMMONS AVE</u>			Street Address <u>9 LINDEN DRIVE</u>		
City <u>PROVIDENCE</u>	State <u>RI</u>	Zip <u>02906</u>	City <u>PROVIDENCE</u>	State <u>RI</u>	Zip <u>02906</u>
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: _____

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FILED
 MAY 11 2016
9285 DS

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.

Katherine T. Sheridan 5/6/2016
 Signature of Officer or Authorized Representative Date

Katherine T. Sheridan
 Print or Type Name of Officer or Authorized Representative

Hamilton House Board of Directors – 2016-2016

Attachment

Diane Strommer
166 Raleigh Avenue Apt 2
Pawtucket, RI 02860

Dianne Isenberg
355 Blackstone Blvd Apt 348
Providence, RI 02906

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MAY 11 2016

BY 9285 DS

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