State of	of Rhode Island and Pro Office of the Secreta		Fee: \$20.00	
	Division Of Business	Services		
	148 W. River St			
Hant	Providence RI 0290 (401) 222-304			
TOPET				
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: 2016				
1. Corporate ID No. 000799927				
2. Name of Corporation GPBOR Care - Community Awareness REALTOR Events				
3. State of Incorporation				
State: <u>RI</u>				
4. Corporate Address in Rhode Island				
No. and Street:365 EDDY STREET, SUITE 1City or Town:PROVIDENCEState: RIZip: 02903Country: 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				
EXCLUSIVELY FOR CHARITABLE RELIGIOUS EDUCATIONAL AND SCIENTIFIC PURPOSES				
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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete				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 C	ode, Country	
PRESIDENT	LEANN DETTORE	271 DORIC AVENU CRANSTON, RI 02910 US		
TREASURER	RICHARD EPSTEIN	140 WICKENDEN ST	REET	

PROVIDENCE, RI 02903 USA

VICE PRESIDENT	SALLY HERSEY	870 OAKLAWN AVENUE CRANSTON, RI 02920 USA		
DIRECTOR	BRENDA L MARCHWICKI	222 CHESTNUT STREET PROVIDENCE, RI 02903 USA		
DIRECTOR	MICHELLE CARTWRIGHT	300 COUNTY ROAD BARRINGTON, RI 02806 USA		
DIRECTOR	JOSEPH MCCARTHY	831 BALD HILL ROAD WARWICK, RI 02886 USA		
DONNA M. ANDREWS 365 EDDY STREET, SUITE 1 PROVIDENCE , RI 02903 9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.				
Signed this 12 Day of May, 2016 at 4:21:01 PM by the authorized person. <i>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.</i>				
By <u>DONNA ANDREWS</u> Signature of Authorized Person				
Form No. 631 Revised 09/07				
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