



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: 2016

1. Corporate ID No. 000092073

2. Name of Corporation Rhode Island's ballet theatre

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 20 LORING STREET

City or Town: MIDDLETOWN

State: RI

Zip: 02842

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

SUPPORT AND PROMOTE A PERFORMANCE GROUP OF CLASSICALLY TRAINED DANCERS.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	WARREN MCAULIFFE	20 LORING STREET MIDDLETOWN, RI 02842 USA
DIRECTOR	ERIN GILDEA	FAIR ST, APT #1 NEWPORT, RI 02840 USA

DIRECTOR	LAWRENCE ZEVON	253 ORCHARD WOODS DR SAUNDERSTOWN, RI 02874 USA
DIRECTOR	MAY GAO	55 SHEEP FARM DR EAST GREENWICH, RI 02818 USA
DIRECTOR	ELLIE LUPO	418 WICKFORD PT NORTH KINGSTOWN, RI 02842 USA
DIRECTOR	GARY REGAN	509 CHESTNUT HILL RD WAKEFIELD, RI 02879 USA
DIRECTOR	NANCY DARLENE MCAULIFFE	20 LORING ST MIDDLETOWN, RI 02842 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

WARREN MCAULIFFE 20 LORING STREET MIDDLETOWN , RI 02842

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 4:32:02 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 WARREN MCAULIFFE
Signature of Authorized Person

Form No. 631
Revised 09/07

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