

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.	2. Exact na	me of the Corporation			· · · · · · · · · · · · · · · · · · ·		
28224	The Pro	The Providence Charitable Fuel Society					
3. State of Incorporation	4. Brief des	Brief description of the character of business conducted in Rhode Island					
Rhode Island	To prov	To provide assistance for the purchase of heating oil to needy organizations.					
5. Principal office address One Turks Head Place - Suite 800			City Providence	State RI	Zip 02903		
6. LIST ALL OFFICERS (NAMES AND ADD	(ESSES) ("X" BOX F	OR ATTACHMENT)				
President Name			Vice-President Name				
F. Richard Dietz			James Worrell				
Street Address			Street Address				
202 Archilles Way			42 Weybosset Street				
City	State	Zip	City	State	Zip		
North Attleboro	MA	02763	Providence	RI	02903		
Secretary Name			Treasurer Name				
Jonathan R. Knowle	S		Jonathan R. Knowles				
Street Address			Street Address				
One Turks Head Place - Suite 800			One Turks Head Place - Suite 800				
City	State	Zip	Çity	State	Zip		
Providence	RJ .	02903	Providence	∣RI	02903		
7. LIST ALL DIRECTORS ("X" BOX FOR ATTACK	(NAMES AND ADI IMENT) 🔽	PRESSES). AHODE IS	LAND CORPORATIONS MUST	LIST NO LESS THAN	THREE (3) DIRECT		
Director Name			Director Name				
Sidney Clifford, Jr.			John C. Drew				
Street Address			Street Address				
60 Freeman Parkwa			12 Angell Court				
Dity	State	Zip	City	State	Zip		
Providence	RI	02906	Warwick	Ri	02889		
Director Name			Director Name				
Robert C. Wood			Mike Chase				
Street Address			Street Address				
39 Fall River Avenue			50 Park Row West - Suite 113				
City	State	Zip	City	State	Zip		
Seekonk	MA	02771	Providence	RI	02903		
. REGISTERED AGENT I		The state of the s	N K KNOWLES				
			ary of State. Changes require fili				

File Date Check No By: FOR SECRETARY OF STATE USE ONLY	FILED MAY 1 6 2016	Under penalty of perjury, I declare and affirm that this report, including any accompanying scheduland that all statements contained herein are true. Signature of Officer or Authorized Representative	les and statements,
Form No. 631 Revised: 04/2014	05	Print or Type Name of Officer or Authorized Represe	entative

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7. LIST <u>ALL</u> DIRECTO	ORS (NAMES AN	ID ADDRESSES). RHODE ISLAND COR R ATTACHMENT)	PORATIONS MUST LIST NO LESS THAN
Director Name Mark H. Chaf	ee		
Street Address One Turks He	ad Place S	Suite 800	
City Providence	State RI	Zip 02903	

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FILED MAY 1 6 2016

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BY____

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