



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 **2012**

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. 000026949		2. Exact name of the Corporation The Executives Association of Rhode Island					
3. State of Incorporation RI		4. Brief description of the character of business conducted in Rhode Island Business networking organization of business owners and decision makers to exchange information and business generation					
5. Principal office address 1643 Warwick Avenue		City Warwick		State RI	Zip 02889		
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) (SEE BOX FOR ATTACHMENT)							
President Name Kevin LeBlanc		Vice-President Name Deborah Corriea		RECEIVED SECRETARY OF STATE CORPORATIONS DIV MAY 17 2016 4:24 PM			
Street Address 1643 Warwick Avenue		Street Address 1643 Warwick Avenue					
City Warwick	State RI	Zip 02889	City Warwick			State RI	Zip 02889
Secretary Name Jason Marinelli		Treasurer Name David Spengler					
Street Address 1643 Warwick Avenue		Street Address 1643 Warwick Avenue					
City Warwick	State RI	Zip 02889	City Warwick			State RI	Zip 02889
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES) (SEE BOX FOR ATTACHMENT)							
Director Name Cathy Corelli		Director Name Jim Borstein					
Street Address 1643 Warwick Avenue		Street Address 1643 Warwick Avenue					
City Warwick	State RI	Zip 02889	City Warwick	State RI	Zip 02889		
Director Name Joyce Wadbrook		Director Name Nancy Thomas					
Street Address 1643 Warwick Avenue		Street Address 1643 Warwick Avenue					
City Warwick	State RI	Zip 02889	City Warwick	State RI	Zip 02889		
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:	
FOR SECRETARY OF STATE USE ONLY	

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

MAY 17 2016

2-11-16

Signature of Officer or Authorized Representative

Date

Jack Hutson - Executive Director

Print or Type Name of Officer or Authorized Representative

AL 274651