



**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. 000063321

2. Name of Corporation Woonsocket Rotary Charities Foundation, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: PO BOX 154
City or Town: WOONSOCKET State: RI Zip: 02895 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

PHILANTHROPIC CHARITABLE EDUCATIONAL IN THE GREATER WOONSOCKET AREA

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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 First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	DONALD BEAUREGARD	PO BOX 154 WOONSOCKET, RI 02895 USA
TREASURER	ANNE CONWAY	PO BOX 154 WOONSOCKET , RI 02895 USA
SECRETARY	LISA CARCIFERO	PO BOX 154

		WOONSOCKET, RI 02895 USA
ASSISTANT SECRETARY	DAVID A FONTAINE	PO BOX 154 WOONSOCKET, RI 02895 USA
VICE PRESIDENT	DAVID SOUCY	WOODLAND RD WOONSOCKET, RI 02895 USA
DIRECTOR	DONALD BEAUREGARD	8 GILFILIAN RD N SMITHFIELD, RI 02896 USA
DIRECTOR	DAVID SOUCY	PO BOX 154 WOONSOCKET, RI 02895 USA
DIRECTOR	ANNE CONWAY	PO BOX 154 WOONSOCKET, RI 02895 USA
DIRECTOR	KATHY SHAWTRAW	PO BOX 154 WOONSOCKET, RI 02895 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**

DAVID A. FONTAINE, CPA 235 NANCY LANE, HARRISVILLE P.O. BOX 154 WOONSOCKET, RI
02895

9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.

Signed this 23 Day of May, 2016 at 7:03:59 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 DAVID A FONTAINE
Signature of Authorized Person

Form No. 631
Revised 09/07