



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.** 000790206

**2. Name of Corporation** Musicolony Preservation

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 28 HAYDN ROAD

City or Town: WESTERLY

State: RI

Zip: 02891

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**

TO COLLECT PRESERVE AND MAINTAIN RELEVANT RECORDS OF MUSICOLONY AND SHELTER HARBOR

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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	ROCHELLE LEVINS	28 HAYDN ROAD WESTERLY, RI 02891 USA
DIRECTOR	JANICE SYLVESTRE MRS	79 WAGNER RD WESTERLY , RI 02891 US

DIRECTOR	SUSAN DAVENPORT	66 ROSSINI RD WESTERLY, RI 02891 US
DIRECTOR	JANET LOFFREDO	6 VERDI RD WESTERLY, RI 02891 US
DIRECTOR	HELENE HARDICK	6GOUNOD RD WESTERLY, RI 02891 US
DIRECTOR	HELEN ROMANO	17 WAGNER RD WESTERLY, RI 02891 US
DIRECTOR	SUSAN SILVER	3 QOUNOD RD WESTERLY, RI 02891 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**

ROCHELLE LEVINS 28 HAYDIN ROAD WESTERLY , RI 02891

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

**Signed this 26 Day of May, 2016 at 10:16:55 AM 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 ROCHELLE LEVINS  
Signature of Authorized Person

Form No. 631  
Revised 09/07