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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

2016 fiscal year 7/1/16 to 6/30/17

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

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 name of the Corporation
29471	**Pawtuxet Valley Peeservation and Historical Society**
3. State of Incorporation: **Rhode Island**	4. Brief description of the character of business conducted in Rhode Island: **Historical Society housing archives and a small museum of artifacts and documents with emphasis on reference material for genealogical research.**

5. Principal office address	City	State	Zip
1679 Main Street	**West Warwick**	**RI**	**02893**

6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐

President Name	Street Address	City	State	Zip
Gerard Tellier, Jr.	**136 Burlingame Road**	**West Warwick**	**RI**	**02893**

Vice-President Name	Street Address	City	State	Zip
Royal J. Pacheco	**10 Westly Street**	**West Warwick**	**RI**	**02893**

Secretary Name	Street Address	City	State	Zip
Frank Ford	**88 Clyde Street**	**West Warwick**	**RI**	**02893**

Treasurer Name	Street Address	City	State	Zip
Co-Treasurers: Janice Mathews/Bob Chorney	**167 Lockwood St./1475 Centreville Road**	**West Warwick/Warwick**	**RI**	**02893/02886**

7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) ☐

Director Name	Street Address	City	State	Zip
Raymond Wolf	**P. O. Box 261**	**Hope**	**RI**	**02831-0261**

Director Name	Street Address	City	State	Zip
LorraineCosta	**15 Highwood Drive**	**Coventry**	**RI**	**02893**

Director Name	Street Address	City	State	Zip
Suzanne D. DeStefano	**19 Hickory Road**	**Coventry**	**RI**	**02816**

Director Name	Street Address	City	State	Zip

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

FILED
MAY 27 2016
BY 2692 DS

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.

Signature of Officer or Authorized Representative — Date: **5/25/16**

Cecilia A. St. Jean
Print or Type Name of Officer or Authorized Representative

Form No. 631
Revised: 04/2014
137438-4-1120106