



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. 001339154

2. Name of Corporation ROSE FERRON FOUNDATION OF RI, INC.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: #133 LAKE SHORE DR

City or Town: #PASCOAG

State: RI Zip: 02859 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 INFORM PEOPLE ABOUT MARIE ROSE FERRON A THIRD ORDER FRANCISCAN AND SOLICIT DONATIONS FOR THE ERECTION OF A CHAPEL IN HER NAME AND RELATED ACTIVITIES

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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
INCORPORATOR	RICHARD C. WHITESSELL	319 PRIVILEGE STREET, UNIT P WOONSOCKET, RI 02895 USA
DIRECTOR	DAVID P. ETHIER	133 LAKE SHORE DRIVE

		PASCOAG, RI 02859 USA
DIRECTOR	DANIEL R. COMERFORD	32 ELIZABETH DRIVE NORTH PROVIDENCE, RI 02904 USA
DIRECTOR	MARIE L. MAGILL	125 DOUGLAS PIKE NORTH SMITHFIELD, RI 02896 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 L. KRAMER 28 MAIN STREET, SUITE 7 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 30 Day of May, 2016 at 12:04:23 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 P. ETHIER  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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