



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. 000026549

2. Name of Corporation HOPE LIBRARY ASSOCIATION

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 374 NORTH ROAD

City or Town: HOPE

State: RI

Zip: 02831

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

LIBRARY

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	BRENDA GARDINER	71 CRANBERRY DR. HOPE, RI 02831 USA
TREASURER	TAMMY TILL	70 CARPENTER RD. FOSTER, RI 02825 USA
DIRECTOR	PATRICIA RODIN	11 MARY GREENE LANE

		FOSTER, RI 02825 USA
DIRECTOR	EILEEN GODBOUT	61 CRANBERRY DR. HOPE, RI 02831 USA
DIRECTOR	MARY STALABOIN	21 VIOLA ST. COVENTRY, RI 02816 USA
DIRECTOR	PATRICIA WEAVER	6 ROSEWOOD CT. COVENTRY, RI 02816 USA
DIRECTOR	CHRISTINE VIVEIROS	14 MARY GREENE LANE FOSTER, RI 02825 USA
VICE PRESIDENT	MARTHA ASERMELY	92 JACKSON FLAT RD. HOPE, RI 02831 USA
SECRETARY	MELISSA BRUNO	237 HOPE FURNACE ROAD HOPE, RI 02831 USA
DIRECTOR	PATRICIA RODIN	11 MARY GREENE LANE FOSTER, RI 02825 USA
DIRECTOR	PAULA DIBIASE	53 HILLSIDE AVE. COVENTRY, RI 02816 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**

PAULA J. DIBIASE 374 NORTH ROAD P.O. BOX 310 HOPE , RI 02831

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

Signed this 1 Day of June, 2016 at 2:38:08 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 PAULA DIBIASE
Signature of Authorized Person

Form No. 631
Revised 09/07