RI SOS Filing Number: 201699675720 Date: 06/01/2016 5:28 PM

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. 000058253

2. Name of Corporation Blue Mitten, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 135 MAIN STREET UNIT B
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

THRIFT SHOP

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	MAC RICHARDSON	500 CAROLINA BACK RD. CHARLESTOWN, RI 02813 USA
TREASURER	MARTHA MINICH	21 BOBWHITE TRAIL GALES FERRY, CT 06335 USA
SECRETARY	ALLANA ALLIK	45 STILLMAN AVE.

0-1512-0

		PAWCATUCK, CT 06379 USA
VICE PRESIDENT	SHIRLEY ANDREWS	256 N. ANGUILLA RD. PAWCATUCK, CT 06379 USA
DIRECTOR	ROBIN GOODWIN	63 SUMMER ST. WESTERLY, RI 02891 USA
DIRECTOR	CHRISTINE DRISCOLL	705 AL HARVEY RD. STONINGTON, CT 06378 USA
DIRECTOR	LEN KAMINSKI	42 HAPPY VALLEY RD. WESTERLY, RI 02891 USA
DIRECTOR	EDWARD LATIMER	63 SUMMER ST. 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

MAC RICHARDSON 500 CAROLINA BACK ROAD CHARLESTOWN , RI 02813

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 5:32:11 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 MARTHA L. MINICH
Signature of Authorized Person

Form No. 631
Revised 09/07