RI SOS Filing Number: 201699718300 Date: 06/02/2016 4:00 PM

State of Rhode Island and Providence Plantations
Department of State - Business Services Division
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040 | **Email:** corporations@sos.ri.gov | **Website:** www.sos.ri.gov

Non-Profit Corporation Annual Report for the year: 2016

Filing period: June 1 - June 30
Filing Fee: $20.00 ***FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A $25.00 PENALTY FEE.**

1. Entity ID Number	2. Exact name of the Corporation
27865	Gilbert & Sullivan Society of Rhode Island
3. State of Incorporation	**4. Brief description of the character of business conducted in Rhode Island**
Rhode Island	Community Theatre Group

5. Principal Office Address	City	State	Zip
PO Box 133	Lincoln	RI	02865-0133

6. List ALL officers (names and addresses) Check the box to indicate an attachment ☐

President Name	Vice-President Name
Richard K. Foster	
Street Address: 83 Indian Trail	Street Address:
City: Coventry State: RI Zip: 02816	City: State: Zip:
Secretary Name	Treasurer Name: Richard K. Foster
Street Address	Street Address: 83 Indian Trail
City: State: Zip:	City: Coventry State: RI Zip: 02816

7. List ALL directors (names and addresses). RI Corporations **MUST** list at least **THREE** directors.
Check the box to indicate an attachment ☐

Director Name	Director Name
Richard K. Foster	Danielle D. Foster
Street Address: 83 Indian Trail	Street Address: 83 INdian Trail
City: Coventry State: RI Zip: 02816	City: Coventry State: RI Zip: 02816
Director Name: Meegan B. Stewart	Director Name:
Street Address: 312 FrontStreet	Street Address:
City: Lincoln State: RI Zip: 02865	City: State: Zip:

8. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.

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.

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

Name of Officer/Authorized Representative	Date
Richard K. Foster	5/30/16
Signature of Officer/Authorized Representative: Richard K. Foster SIGN DOCUMENT HERE	

Form No. 631
Revised: 2016

FILED 02
JUN 02 2016

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BY 27163