



**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. 000071580

2. Name of Corporation National Education Association Portsmouth

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 120 EDUCATION LANE

City or Town: PORTSMOUTH

State: RI

Zip: 02871

Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 51 AMESBURY CIRCLE

City or Town: MIDDLETOWN

State: RI

Zip: 02842

Country:

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

TO PROMOTE SELF-IMPROVEMENT FOR MEMBERS & TO CREATE GOODWILL
BETWEEN NEA PORTSMOUTH MEMBERS AND THE COMMUNITY.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
PRESIDENT	AMANDA BOSWELL	PO BOX 660 NORTH SCITUATE, RI 02852 USA
TREASURER	BETH ANN TRAVERS	51 AMESBURY CIRCLE MIDDLETOWN, RI 02842 USA

SECRETARY	MELISSA BELLOTTI-STEIN	30 LEE ANN DRIVE SEEKONK, MA 02771 USA
VICE PRESIDENT	ALISON ARRUDA	52 VIKING DRIVE BRISTOL, RI 02809 USA
DIRECTOR	AMANDA BOSWELL	PO BOX 660 NORTH SCITUATE , RI 02852 USA
DIRECTOR	ALISON ARRUDA	52 VIKING DRIVE BRISTOL, RI 02809 USA
DIRECTOR	BETH TRAVERS	51 AMESBURY CIRCLE MIDDLETOWN, RI 02842 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**

BETH A. TRAVERS PORTSMOUTH HIGH SCHOOL EDUCATION LANE PORTSMOUTH , RI 02871

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

Signed this 8 Day of June, 2016 at 1:35:38 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 BETH A TRAVERS
Signature of Authorized Person

Form No. 631
Revised 09/07

© 2007 - 2016 State of Rhode Island and Providence Plantations
All Rights Reserved