

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 Filing period: June 1 - June 30	Annual Report for the y	rear: 2016	[
		JULY 30 WILL RESULT IN A \$	25.00 PENALT	/ FEE.	
1. Entity ID Number	2. Exact name of the Corporation				
27514	Newport Garden Club			"	
3. State of Incorporation	4. Brief description of the character of business conducted in Rhode Island				
PI	Promotion of knowledge of gardening, floriculture, and				
5. Principal Office Address		City	State	Zip	
2 Coggeshall	Way	Middletown	RI	02842	
6. List ALL officers (names and addresses) Check the box to indicate an attachment				chment	
President Name Kate Lucey		Vice-President Name Susan Ruf			
Street Address 230 Tr		Street Address 300 Gi	blos Aven	we	
city Middletown	State RI Zip 02842	city Newport	State RT	Zip 02840	
Secretary Name Betsy West		Treasurer Name Mary	Tary Meadows		
Street Address 226 Carroll Avenue		Street Address 2 Coggeshall Way			
city Newport	State RI. Zip 02840	City Middletown	State RI	zip 02842	
7. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment					
Director Name Anne Hogg		Director Name Deborah Bartlett			
	est Main Road	Street Address 4 Mum	ford Av	enue	
city Portsmouth	State RI Zip 02871	city Newport	State RI	Zip 02840	
Director Name Betsy Leerssen		Director Name Wilma Simpson			
IT HOTA Plane		Street Address 15 Champlin Street			
City Newport	State RI Zip 02840			Zip 02840	
3. 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, Treesurer, duly Authorized Representative, Receiver or Trustee.					
Name of Officer/Authorized Representative Mary F. Meadows			Date 6-6-16		
ignature of Officer/Authorized Representative Nory J. Meadows GIGN DOCUMENT HERE					
J					

Form No. 631 Revised: 2016 NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2016 ATTACHMENT

NEWPORT GARDEN CLUB ENTITY ID NUMBER: 27514

SECTION 6: ADDITIONAL OFFICERS

CHERYL MROZOWSKI, CO-PRESIDENT 25 SPOUTING ROCK ROAD NEWPORT, RI 02840

SECTION 7: ADDITIONAL DIRECTORS

BARBARA BOHAN 632 TUCKERMAN AVENUE MIDDLETOWN, RI 02842

DEBBY KELSEY 4 ELM STREET NEWPORT, RI 02840

FILED

JUN 0 8 2016

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