



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. 000489445

2. Name of Corporation North East Grange Lecturers Associatiooon

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 31 WEST MAIN RD

City or Town: PORTSMOUTH

State: RI

Zip: 02871

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

TO CARRY OUT THE EDUCATIONAL, CHARITABLE AND FRATERNAL PROGRAMS OF THAT NON-PROFIT FRATERNAL ORGANIZATION COMMONLY KNOWN AS THE NATIONAL GRANGE, PATRONS OF HUSBANDRY, AS THEY PERTAIN TO ITS PROGRAMS THROUGHOUT THE STATES OF RHODE ISLAND AND ITS SISTER STATES IN NEW ENGLAND AND THE STATE OF NEW YORK.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	SCOTT SHERMAN	31 WEST MAIN RD

		PORTSMOUTH, RI 02871 US
TREASURER	MARGARET BERNHARDT	424 CEDARL LANE CHESHIRE, CT 06410 USA
SECRETARY	JANET SEGUR	26 GLENWOOD PLACE RUTLAND, MA 01543-2005 US
VICE PRESIDENT	LINDA SANDERSON	229 MEARS ROAD MILTNO, VT 05468 US
DIRECTOR	JANE TROMBI	794-H COURT ST. KEENE, NH 03431 USA
DIRECTOR	CAROLYN BAILEY	168 CANAL ST. LYONS, NY 14489 US
DIRECTOR	KATHY LORRAIN	7 COTE DRIVE POLAND, ME 04274 US

**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**

ROXANNE NELSON 749 WAITES CORNER ROAD WEST KINGSTON , RI 02892

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

Signed this 14 Day of June, 2016 at 6:02:51 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 MARGARET BERNHARDT
Signature of Authorized Person

Form No. 631
Revised 09/07