



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.** 000074244

**2. Name of Corporation** The Council of Seven/Royal House of PokanoketPokanoket  
Tribe/Wampanoag Nation

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 102 MELROSE STREET

City or Town: PROVIDENCE

State: RI Zip: 02907 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 COMBINE AND UNITE ALL THE DESCENDENTS OF POKANOKET/WAMPANOAG.

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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	MICHAEL S WEEDEN	14 WEDGEWOOD LN MILLBURY, MA 01527 USA
SECRETARY	CRAIG A MARTIN	102 MELROSE ST PROVIDENCE, RI 02907 USA

VICE PRESIDENT	LAURI GROH-GERMAIN	102 MELROSE ST PROVIDENCE, RI 02907 USA
DIRECTOR	CRAIG MARTIN	102 MELROSE ST PROVIDENCE, RI 02907 USA
DIRECTOR	LAURI GROH-GERMAIN	102 MELROSE ST PROVIDENCE, RI 02907 USA
DIRECTOR	MICHAEL WEEDEN	14 WEDGEWOOD LN MILLBURY, MA 01527 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**

CRAIG A. MARTIN POKANOKET TRIBE 102 MELROSE STREET PROVIDENCE , RI 02907

**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 8:47:53 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 CRAIG A. MARTIN  
Signature of Authorized Person

Form No. 631  
Revised 09/07