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. 000030265

2. Name of Corporation RHODE ISLAND HIGHLANDERS PIPE BAND

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 30 SWEET BIRCH TRAIL
City or Town: SAUNDERSTOWN State: RI Zip: 02874 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 20 DEERFIELD RD

City or Town: MEDWAY State: MA Zip: 02053 Country: UNI

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

MUSICAL GROUP

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
TREASURER	MORVEN BOYCE	20 DEERFIELD RD MEDWAY, MA 02053 USA
SECRETARY	LAUREN YOUMAN	43 MILK ST BLACKSTONE, MA 01504 USA
PRESIDENT	WALLACE COBURN	41 ALTON STREET

		WALPOLE, MA 02081- USA
DIRECTOR	DEBBIE KANE	30 SWEET BIRCH TRAIL SAUNDERSTOWN, RI 02874 USA
DIRECTOR	BOB REID	91 KINGS GRANT ROAD SAUDNERSTOWN, RI 02874 USA
DIRECTOR	BRAD LIVINGSTON	8 WESTLAND AVENUE CHELMSFORD, MA 01824 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

DEBORAH A. KANE 30 SWEET BIRCH TRAIL SAUNDERSTOWN , RI 02874

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

Signed this 16 Day of June, 2016 at 8:56:25 AM 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 MORVEN BOYCE
Signature of Authorized Person

Form No. 631
Revised 09/07