



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. 000081414

2. Name of Corporation AIDS Quilt Rhode Island

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 108 CHAMPLIN PLACE NORTH

City or Town: NEWPORT

State: RI Zip: 02840 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 USE THE AIDS MEMORIAL QUILT TO PROMOTE HEALING, HEIGHTEN
AQWARENESS AND INSPIRE ACTION IN THE STRUGGLE AGAINST HIV AND AIDS

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	RUSSELL OWENS MILHAM	108 CHAMPLIN PLACE N. NEWPORT, RI 02840 USA
SECRETARY	BETH PAUL MILHAM	108 CHAMPLIN PLACE NORTH NEWPORT, RI 02840 USA

DIRECTOR	VINNIE VELAZQUEZ	423 OAKLAND BEACH RD. WARWICK, RI 02889 USA
DIRECTOR	LUZ BETANCUR	423 OAKLAND BEACH RD. WARWICK, RI 02889 USA
DIRECTOR	IRA STODDARD	14A SAWIN AVE. N.PROVIDENCE, RI 02911 USA
DIRECTOR	CARL FERREIRA	4241 COUNTY ST. SOMERSET, MA 02726 USA
DIRECTOR	SHERRILL WARCH	7 AQUIDNECK DR. MIDDLETOWN, RI 02842 USA
SECRETARY	BETH P. MILHAM	108 CHAMPLIN PLACE N. NEWPORT, RI 02840 USA
DIRECTOR	PHILIP FIADINO	729 BELLEVUE AVE. #9 NEWPORT, RI 02840 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 MILHAM 108 CHAMPLIN PLACE NORTH NEWPORT , RI 02840

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 12:47:29 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 MILHAM
Signature of Authorized Person

Form No. 631
Revised 09/07

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