



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. 000064892

2. Name of Corporation Unitarian Universalist Congregation of South County

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 27 NORTH ROAD

City or Town: PEACE DALE

State: RI

Zip: 02879

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

WORSHIP, RELIGIOUS EDUCATION, AND RELATED SUPPORT ACTIVITIES

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	ELIZABETH DALTON	PO BOX 465 HOPE VALLEY, RI 02832 USA
TREASURER	STEVE HARRISON	1740 MOORESFIELD RD WAKEFIELD, RI 02879 USA
SECRETARY	MARY FULTON	765 BROAD ROCK RD

		WAKEFIELD, RI 02879 USA
VICE PRESIDENT	LINDA WHYTE BURRELL	104 ARCADIA RD HOPE VALLEY, RI 02832 USA
DIRECTOR	RANDI MARTEN	88 ROCKY BROOK WAY WAKEFIELD, RI 02879 USA
DIRECTOR	SALLY BARNEY	23 HELME RD KINGSTON, RI 02881 USA
DIRECTOR	NATALIE HERBERMANN	227 HIGH ST WAKEFIELD, RI 02879 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

JEFF R. BERRY 52 GREEN KINYON DRIFTWAY NARRAGANSETT , RI 02882

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 2:02:30 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 KATHLEEN M CARLAND
Signature of Authorized Person

Form No. 631
Revised 09/07