



**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. 000093598

2. Name of Corporation Senior Action in a Gay Environment/Rhode ISLAND (SAGE/RI)

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 1 VIRGINIA AVE
SUITE 102

City or Town: PROVIDENCE State: RI Zip: 02905 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 EMPOWER OLDER LESBIANS AND GAY MEN TO TAKE PART IN DECISION MAKING THAT EFFECTS THEIR LIVES AND INFLUENCE SOCIAL POLICIES.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	PATRICK SMOCK	300 PEARL ST. #206 PROVIDENCE , RI 02903 USA
PRESIDENT	DEB DECARLO	158 10TH STREET

DIRECTOR	FREEMAN FREEMAN	PROVIDENCE , RI 02906 USA 21 HARKNESS ST UNIT 2 PROVIDENCE , RI 02909 USA
DIRECTOR	CORINNE HILL	85 OAKLAND AVE CRANSTON , RI 02910 USA
DIRECTOR	SALLY HAY	139 ELDER STREET LINCOKN, RI 02865 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**

LYNDA GILBERT 1 VIRGINIA AVENUE PROVIDENCE , RI 02905

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 2:33:30 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 JOAN KWIATKOWSKI
Signature of Authorized Person

Form No. 631
Revised 09/07

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