State	of Rhode Island and Pro Office of the Secreta		Fee: \$20.00
	Division Of Business 148 W. River S	treet	
HOPE	Providence RI 029 (401) 222-30		
Non-Profit Corporation Annual Report Filing Period: June 1 - June 30			
In accordance with R.I.G.L. 7-6- report within the time prescribed \$25.00.			
ANNUAL REPORT YEAR: 20	<u>16</u>		
1. Corporate ID No. 0003	332489		
2. Name of Corporation CA	BINS		
3. State of Incorporation			
State: <u>RI</u>			
4. Corporate Address in Rho	de Island		
No. and Street: <u>4 APPL</u> City or Town: <u>LINCO</u>	EWOOD LANE	e: RI Zip: <u>02865</u> Count	try: USA
5. Foreign Corporation. Enter	r Principal Office Address		
No. and Street:			
City or Town: State:	Zip: Country:		
6. Brief Description of the Ch	naracter of the Affairs Which a	re Actually Conducted in Rho	de Island
	· · ·	<u>ND SUPPORT STAFF TO AI</u> JTS IN AND AROUND OUR	
7. Names and Addresses of t			
	ust be listed. If officers and/c	or directors have been elected	, the title
THE NUMBER OF DIRECTORS OF 7-6-23	A DOMESTIC(RHODE ISLAND)CORPO	RATION SHALL NOT BE LESS THAN TH	IREE(3). R.I.G.L.
Title	Individual Name	Address	
PRESIDENT	First, Middle, Last, Suffix	Address, City or Town, State, Zip C	
	MENDONCA	17 FAIRMONT AVEI LINCOLN, RI 02865 US	-
TREASURER	DEBORAH M MICHALENKA		NE

4 APPLEWOOD LANE LINCOLN, RI 02865 USA

SECRETARY	BETH A VENDITTI	42 YELLOWSTONE AVENUE WARWICK, RI 02888 USA	
VICE PRESIDENT	PAUL BALSAMO	103 DEAN RIDGE COURT CRANSTON, RI 02920 USA	
DIRECTOR	BETH A VENDITTI	43 YELLOWSTONE AVENUE WARWICK, RI 02888 USA	
DIRECTOR	JESSICA BEAUREGARD- MENDONCA	17 FAIRMONT AVENUE LINCOLN, RI 02865 USA	
DIRECTOR	DEBORAH M MICHALENKA	4 APPLEWOOD LANE LINCOLN, RI 02865 USA	
DIRECTOR	PAUL BALSAMO	103 DEAN RIDGE COURT CRANSTON, RI 02920 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 M MICHALENKA 4 APPLEWOOD LANE LINCOLN, RI 02865

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

**Signed this 19 Day of June, 2016 at 2:58:35 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 DEBORAH M MICHALENKA

Signature of Authorized Person

Form No. 631 Revised 09/07

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