



State of Rhode Island and Providence Plantations

**Department of State - Business Services Division**


**Annual Report for the year: 2016**

**Non-Profit Corporation**

→ Filing period: June 1 - June 30

→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by July 30.

1. Entity ID Number <b>31302</b>		2. Exact name of the Corporation <b>The Richmond Historical Society</b>			
3. State of Incorporation <b>Rhode Island</b>		4. Brief description of the character of business conducted in Rhode Island <b>Education in regional and local history; archival preservation and maintenance</b>			
5. Principal Office Address <b>5 Town House Road</b>		City <b>Wyoming</b>		State <b>RI</b>	Zip <b>02898</b>
6. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>David Johnson</b>			Vice-President Name <b>Richard E. Wolke</b>		
Street Address <b>One Shadow Ridge Dr</b>			Street Address <b>25 Carolina Main St</b>		
City <b>Carolina</b>	State <b>RI</b>	Zip <b>02812</b>	City <b>Carolina</b>	State <b>RI</b>	Zip <b>02812</b>
Secretary Name <b>Johnna Wolke</b>			Treasurer Name <b>Carolyn S. Richard</b>		
Street Address <b>25 Carolina Main St</b>			Street Address <b>96 Shannock Hill Rd -Box 8</b>		
City <b>Carolina</b>	State <b>RI</b>	Zip <b>02812</b>	City <b>Shannock</b>	State <b>RI</b>	Zip <b>02875-0008</b>
7. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>Doreen Wagner</b>			Director Name <b>Patricia A. Millar</b>		
Street Address <b>42 Shickasheen Way</b>			Street Address <b>49 Hillsdale Rd</b>		
City <b>West Kingston</b>	State <b>RI</b>	Zip <b>02892</b>	City <b>West Kingston</b>	State <b>RI</b>	Zip <b>02892</b>
Director Name <b>Jessica Wolke</b>			Director Name		
Street Address <b>214 Shannock Village Rd</b>			Street Address		
City <b>Shannock</b>	State <b>RI</b>	Zip <b>02875</b>	City	State	Zip
8. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
<b>Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.</b>					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>					
Name of Officer/Authorized Representative <b>Carolyn S. Richard, Treasurer</b>				Date <b>June 17, 2016</b>	
Signature of Officer/Authorized Representative 					

**MAIL TO:**

**Division of Business Services**

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.ri.gov

**FILED**

JUN 20 2016

BY

0950 RS