



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State - Division of Business Services

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

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

## NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2016

Filing Period: June 1 - June 30 • This report must be typed or printed legibly.

Filing Fee: \$20.00 • FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. <b>118174</b>		2. Exact name of the Corporation <b>The Steere House Foundation</b>			
3. State of Incorporation <b>RI</b>		4. Brief description of the character of business conducted in Rhode Island <b>Fundraising activities to support resident care programs at Steere House.</b>			
5. Principal office address <b>100 Borden Street</b>		City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>	
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name <b>Andrew C. Spacone</b>		Vice-President Name <b>Linda M. Cannistra</b>			
Street Address <b>648 Blackstone Blvd.</b>		Street Address <b>87 Ridge Road</b>			
City <b>Providence</b>	State <b>RI</b>	Zip <b>02906</b>	City <b>Smithfield</b>	State <b>RI</b>	Zip <b>02917</b>
Secretary Name <b>Diane Steere Nobles, Ph.D.</b>		Treasurer Name <b>Norma J. Owens, Pharm D. BCPS, FCCP</b>			
Street Address <b>17 East Pond Road</b>		Street Address <b>133 Camden Court</b>			
City <b>Narragansett</b>	State <b>RI</b>	Zip <b>02882</b>	City <b>Wakefield</b>	State <b>RI</b>	Zip <b>02879</b>
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS <b>MUST</b> LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name <b>Andrew C. Spacone</b>		Director Name <b>Dianne Bourget</b>			
Street Address <b>648 Blackstone Blvd.</b>		Street Address <b>881 Route 198</b>			
City <b>Providence</b>	State <b>RI</b>	Zip <b>02906</b>	City <b>Woodstock</b>	State <b>CT</b>	Zip <b>06281</b>
Director Name <b>Carol C. McMahon</b>		Director Name <b>Julie H. Richard</b>			
Street Address <b>89 Yale Avenue</b>		Street Address <b>233 Highland Street</b>			
City <b>Warwick</b>	State <b>RI</b>	Zip <b>02888</b>	City <b>Woonsocket</b>	State <b>RI</b>	Zip <b>02895</b>
8. REGISTERED AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 641.					

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

File Date \_\_\_\_\_

Check No \_\_\_\_\_

By: \_\_\_\_\_

FOR SECRETARY OF STATE USE ONLY

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.

Signature of Officer or Authorized Representative

Date

Print or Type Name of Officer or Authorized Representative