**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. | 2. Exact name of the Corporation |
|---|---|
| 118174 | The Steere House Foundation |
| 3. State of Incorporation | 4. Brief description of the character of business conducted in Rhode Island |
| RI | Fundraising activities to support resident care programs at Steere House. |

| 5. Principal office address | City | State | Zip |
|---|---|---|---|
| 100 Borden Street | Providence | RI | 02903 |

**6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT)** ☐

| President Name | Street Address | City | State | Zip |
|---|---|---|---|---|
| Andrew C. Spacone | 648 Blackstone Blvd. | Providence | RI | 02906 |
| **Vice-President Name** | **Street Address** | **City** | **State** | **Zip** |
| Linda M. Cannistra | 87 Ridge Road | Smithfield | RI | 02917 |
| **Secretary Name** | **Street Address** | **City** | **State** | **Zip** |
| Diane Steere Nobles, Ph.D. | 17 East Pond Road | Narragansett | RI | 02882 |
| **Treasurer Name** | **Street Address** | **City** | **State** | **Zip** |
| Norma J. Owens, Pharm D. BCPS, FCCP | 133 Camden Court | Wakefield | RI | 02879 |

**7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT)** ☐

| Director Name | Street Address | City | State | Zip |
|---|---|---|---|---|
| Andrew C. Spacone | 648 Blackstone Blvd. | Providence | RI | 02906 |
| **Director Name** | **Street Address** | **City** | **State** | **Zip** |
| Dianne Bourget | 881 Route 198 | Woodstock | CT | 06281 |
| **Director Name** | **Street Address** | **City** | **State** | **Zip** |
| Carol C. McMahon | 89 Yale Avenue | Warwick | RI | 02888 |
| **Director Name** | **Street Address** | **City** | **State** | **Zip** |
| Julie H. Richard | 233 Highland Street | Woonsocket | RI | 02895 |

**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**

FILED
JUN 20 2016
BY 15222 DS

**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: 06/14/16

Andrew Spacone
Print or Type Name of Officer or Authorized Representative

**Form No. 631**
**Revised: 04/2014**