



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. 000311293

2. Name of Corporation CENTREVILLE SAVINGS BANK CHARITABLE FOUNDATION

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 1218 MAIN STREET

City or Town: WEST WARWICK State: RI Zip: 02893 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

FOR CHARITABLE PURPOSES, INCLUDING THE MAKING OF DISTRIBUTIONS TO ORGANIZATIONS THAT QUALIFY AS EXEMPT ORGANIZATIONS UNDER SEC 501(C)(3) OF THE INTERNAL REVENUE CODE AND FUTURE TAX CODE.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	Address
PRESIDENT	THOMAS J LAMB JR	85 FRY BROOK DR EAST GREENWICH, RI 02818 USA
DIRECTOR	WALTER F RICHARDSON III	12 ST ONGE DR

		WEST WARWICK, RI 02893 USA
DIRECTOR	JAMES M VESEY	19 JUNIPER HILL DR COVENTRY, RI 02816 USA
DIRECTOR	COLLEEN M DICKSON	153 KIMBERLY DR WEST GREENWICH, RI 02817 USA
DIRECTOR	PHILIP CASACALENDA III	93 TIOGUE AVE WEST WARWICK, RI 02893 USA
DIRECTOR	JILLIAN J DESHIRO	106 LAWNDAL RD MANSFIELD, MA 02048 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**

THOMAS J. LAMB, JR 1218 MAIN STREET WEST WARWICK , RI 02893

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

Signed this 29 Day of June, 2016 at 10:23:05 AM 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 JILLIAN J DESHIRO
Signature of Authorized Person

Form No. 631
Revised 09/07