-	_
	Aura
1	*# N
14	1397
	. 69
- 4	

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	2. Exact name of the Corporation Friends of the James Town Philomenian Library					
3. State of Incorporation $\mathcal{R} \overline{L}$	4. Brief description of the character of business conducted in Rhode Island					
N.I.	RI Promote and support library					
5. Principal Office Address	0)		City —	State	Zip	
26 North Road		city Jamestown	KI	02835		
6. List ALL officers (names and addresses)		Check the box to indicate an attachment				
President Name Arlene Petit		Vice-President Name Beverly Rudman				
Street Address 28 Bryer Ave.		Street Address 65 Green Lane				
city Jamestown	State RI	Zip02835	city Jamestown	State RI	Zip 02835	
Secretary Name Aileen Flath		Treasurer Name Mary-Alice Lurgio				
Street Address 7 Melrose Aue.		Street Address 193 East Shore Rd.				
city Jamesrown	State RI	Zip 02835	city Jamestown	State RI	Zip 02835	
7. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors.						
Director Nome T			In the second se	Check the box to in	ndicate an attachment	
Director Name Tim Collins		Director Name Dan Lilly				
Street Address 179 Narragansett Ave.		Street Address 231 Seaside Dr.				
city James rown	State RI	Zip 02835	city Jamestown	State RI	^{Zip} 02835	
Director Name Martha Morgan		Director Name Alexa Furtado				
		Street Address 14 Luther St.				
city Jamestown	State RT	Zip 02835	City James Town	State RI	Zip 02835	
8. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.						
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.						
This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.						
Name of Officer/Authorized Representative Mary-Alice Lurgio, treasurer		Date 6/28/16				
Signature of Officer/Authorized Representative						
Mary-Alice Lurgio FILFD						

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov

FORM 631 - Revised: 05/2016

Friends of the Jamestown Philomenian Library

Annual Report for the year 2016

Customer ID Number: ti18d9

PIN: 9654

Additional Directors:

Reagan Baker

701 East Shore Rd., Jamestown, RI 02835

Carol Buglio

13 Mizzen Avenue, Jamestown, RI 02835

Jenn Tauser

95 Clinton Avenue, Jamestown, RI 02835

Lauren McCombs

59 Grinnell St., Jamestown, RI 02835

Christine Cassidy

49 Clarke St., Jamestown, RI 02835

Sherry Lucas Flaherty

119 Sloop St., Jamestown, RI 02835

Dick Lynn

15 Seafarer Court, Jamestown, RI 02835