



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. 000163013		2. Exact name of the Corporation SOCIAL ENTERPRISE GREENHOUSE			
3. State of Incorporation RI		4. Brief description of the character of business conducted in Rhode Island Provides business development and other related services to social enterprises and social entrepreneurs.			
5. Principal office address 10 DAVOL SQUARE, SUITE 100		City PROVIDENCE		State RI	Zip 02903
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name DIANE LYNCH		Vice-President Name ALAN HARLAM			
Street Address 1400 South Road		Street Address 1256 Narragansett Blvd			
City East Greenwich	State RI	Zip 02818	City Cranston	State RI	Zip 02905
Secretary Name ROB PANOFF		Treasurer Name SCOT JONES			
Street Address 235 Bridgetown Road		Street Address 275 Forge Rd			
City Saunderston	State RI	Zip 02874	City N. Kingstown	State RI	Zip 02852
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
Director Name		Director Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Director Name		Director Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
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

Form No. 631
Revised: 04/2014

FILED
JUN 30 2016

By 278091

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.

Rob Panoff 6/3/16
Signature of Officer or Authorized Representative Date

Secretary
Print or Type Name of Officer or Authorized Representative

Social Enterprise Greenhouse

Diane Lynch – Chair
1400 South Road
East Greenwich, RI 02818

Alan Harlam- Vice Chair
1256 Narragansett Blvd.
Cranston, RI 02905

Scot Jones – Treasurer
275 Forge Road
N. Kingstown, RI. 02852

Rob Panoff - Secretary
235 Bridgetown Road
Saunderstown, RI 02874

Directors

Kim Anderson
170 Adams Point
Barrington, RI 02806

Ken Barrette
199b South Road,
Exeter, RI 02822

Kathryn Bendheim
10 Woodhaven Road
Barrington, RI 02806

Sylvia Brown
50 Park Row West, Apt 908
Providence, RI 02903

John Farber
105 Freeman Parkway
Providence, RI 02906

MJ Kaplan
283 Wayland Ave.
Providence, RI 02906

Mark Marosits
45 Third Street
Newport, RI 02840

Sylvia Maxfield
34 Whale Rock Rd
Jamestown RI 02835

John Partridge
9 John Street
Providence, RI 02906

Jim Seymour
11 Harbor Court
North Kingstown, RI 02852