



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. 000026249

2. Name of Corporation Langworthy Public Library

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 24 SPRING STREET

City or Town: HOPE VALLEY State: RI Zip: 02832 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

PUBLIC LENDING AND REFERENCE LIBRARY

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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 First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	JANICE MILLS ENSING	250 CANONCHET ROAD, P.O. BOX 187 ROCKVILLE, RI 02873 USA
TREASURER	DIANE LANG	GARNET HOPE VALLEY, RI 02832 USA
SECRETARY	GABRIELLA HARRINGTON	HARRINGTON CROSSING

		HOPE VALLEY, RI 02832 USA
VICE PRESIDENT	JAKE NEWSOME	25 SPRING STREET HOPE VALLEY, RI 02832 USA
DIRECTOR	DAWN ROMANS	390 SPRING STREET, P.O. BOX 163 ROCKVILLE, RI 02873 USA
DIRECTOR	JENNIFER SCHNEIDER	12 TEFT COURT HOPE VALLEY, RI 02832 USA
DIRECTOR	DONNA BODELL	WOODVILLE ROAD HOPE VALLEY, RI 02832 USA
DIRECTOR	DEB HOUSE	SPRING STREET HOPE VALLEY, RI 02832 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**

MICHELLE WALKER 39 A BERRIE LANE ROCKVILLE , RI 02873

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

Signed this 1 Day of July, 2016 at 11:19:49 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 MARGARET M. VICTORIA, LIBRARY DIRECTOR
Signature of Authorized Person

Form No. 631
Revised 09/07

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