



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. 000128321

2. Name of Corporation Wakefield Concert Band

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: P.O. BOX 616

City or Town: WAKEFIELD State: RI Zip: 02879 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

TO EDUCATE ITS MEMBERS, ENTERTAIN ITS AUDIENCES AND TO SERVE THE
COMMUNITY

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	WILLIAM KEITH VORHABEN	PO BOX 616 WAKEFIELD, RI 02879 USA
TREASURER	CYNTHIA WYMAN	PO BOX 616 WAKEFIELD, RI 02880 USA

SECRETARY	LAURA CARY	PO BOX 616 WAKEFIELD, RI 02880 USA
MEMBER AT LARGE	LAWRENCE GREBSTEIN	PO BOX 616 WAKEFIELD, RI 02880 USA
VICE PRESIDENT	ADAM LEVINSON	PO BOX 616 WAKEFIELD, RI 02880 USA
DIRECTOR	STEPHEN TORO	PO BOX 616 WAKEFIELD, RI 02880 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

DAVID STEPHENSON 3629 TOWER HILL ROAD WAKEFIELD , RI 02879

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

Signed this 8 Day of July, 2016 at 2:51:23 PM 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 CYNTHIA WYMAN
Signature of Authorized Person

Form No. 631
Revised 09/07