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. 000159351

2. Name of Corporation Exeter-West Greenwich PTA

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 30 NOOSENECK HILL ROAD
City or Town: EXETER State: RI Zip: 02822 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 PROMOTE THE WELFARE OF CHILDREN AND YOUTH IN HOME AND SCHOOL AND COMMUNITY. TO FACILITATE PARENT AND TEACHER INVOLVEMENT IN SCHOOL ACTIVITIES AND TO ADVOCATE FOR CHILDREN

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
0-8544-0 PRESIDENT	MAEYEE BARRETTE	199B SOUTH ROAD EXETER, RI 02822 USA
DIRECTOR	CATHIE COOL RUMSEY	30 JEANNETTE COURT

		EXETER, RI 02822 USA
DIRECTOR	TAMI DEPIETRO	52 REYNOLDS ROAD WEST GREENWICH, RI 02817 USA
DIRECTOR	CHRISTINA BOUDREAU	75 TRIPPS CORNER ROAD EXETER, RI 02822 USA
DIRECTOR	HOLLI FILIAREAULT	46 HEMLOCK DRIVE EXETER, RI 02822 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

SHARON WALSH 30 NOOSENECK HILL ROAD EXETER , RI 02822

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

Signed this 16 Day of July, 2016 at 10:56:10 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 MAEYEE BARRETTE
Signature of Authorized Person

Form No. 631
Revised 09/07

© 2007 - 2016 State of Rhode Island and Providence Plantations
All Rights Reserved