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. 000789906

2. Name of Corporation The Center for Sexual Pleasure and Health

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 250 MAIN STREET
UNIT 1/BOX 11
City or Town: PAWTUCKET State: RI Zip: 02860 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

The Center for Sexual Pleasure and Health is organized for charitable and benevolent purposes including providing sex-positive sexuality education, research opportunities, cultural dialogue, and support to professional and non-professional audiences by means of classes, workshops, performances, social gatherings, practical skills-building events, and similar events. The Center also maintains a research library relevant to these purposes. The Center for Sexual Pleasure and Health is organized for all such purposes as are permissible for a corporation formed under (appropriate RI law). The Center for Sexual Pleasure and Health is organized exclusively for charitable and educational purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986, or corresponding section of any future federal tax code.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

0-1691-0

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
CLERK	BRIAN M FLAHERTY	102 LOS ANGELES STREET NEWTON, MA 02458 USA
DIRECTOR	BRIAN FLAHERTY	102 LOS ANGELES STREET NEWTON, MA 02458 USA
DIRECTOR	ERICA BUSILLO ADAMS	44 HUXLEY AVENUE PROVIDENCE, RI 02908 USA
DIRECTOR	BENJAMIN LASSERRE	9 TRAYMORE STREET CAMBRIDGE, MA 02140 USA
DIRECTOR	BONNIE L SHEPARD	9 GREENOUGH STREET BROOKLINE, MA 02445 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

MEGAN ANDELLOUX 250 MAIN STREET, UNIT 6 PAWTUCKET , RI 02860

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

Signed this 28 Day of July, 2016 at 2:21:31 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 BRIAN M FLAHERTY
Signature of Authorized Person

Form No. 631
Revised 09/07