



**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.** 000134232

**2. Name of Corporation** Literacy Volunteers of East Bay

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 17 CROADE STREET

City or Town: WARREN

State: RI

Zip: 02885

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**

RECRUITS AND TRAINS TUTORS WHO WORK ONE-ON-ONE WITH ADULTS WHO NEED HELP LEARNING TO READ, WRITE AND SPEAK ENGLISH AS WELL AS THOSE PREPARING FOR THE GED EXAM.

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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	DENNIS HOGAN	67 SEAL ISLAND ROAD BRISTOL, RI 02809 USA
TREASURER	RICHARD RUMMEL	48 VILLAGE DRIVE

		RIVERSIDE, RI 02915 USA
SECRETARY	ADRIENNE C. SHAW	12 GOOSEBERRY ROAD NEWPORT, RI 02840 USA
DIRECTOR	ISABEL SALZILLO	25 RIVER STREET EAST PROVIDENCE, RI 02915 USA
DIRECTOR	PHYLLIS SEEBA	213 COREY LANE MIDDLETOWN, RI 02842 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**

ELIZABETH L. WEINSTEIN 17 CROADE STREET WARREN , RI 02885

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

**Signed this 30 Day of July, 2016 at 6:54:18 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 ELIZABETH L. MCDOWELL  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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