



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. 000118885

2. Name of Corporation Block Island North Light Association

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 90 NATIONAL DRIVE

City or Town: GLASTONBURY

State: RI

Zip: 06033

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

RAISING FUNDS, THROUGH GRANTS, DONATIONS OR OTHER MEANS TO EXPAND THE SAME, LESS EXPENSES, FOR THE PURPOSE OF PRESERVING AND MAINTAINING THE BLOCK ISLAND NORTH LIGHT

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	CAROL LESLIE	PO BOX 1662 BLOCK ISLAND, RI 02807 USA
TREASURER	CHRISTOPHER WOLF	90 NATIONAL DR

		GLASTONBURY, CT 06033 USA
DIRECTOR	JOHN HOPF	LAKESIDE DRIVE BLOCK ISLAND, RI 02807 USA
DIRECTOR	CAROL LESLIE	PO BOX 1662 BLOCK ISLAND, RI 02807 USA
DIRECTOR	CARA ROSTOWSKI	PO BOX 1923 BLOCK ISLAND, RI 02807 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**

JOHN R. PAYNE, JR. 46 GRANITE STREET WESTERLY , RI 02891

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

Signed this 17 Day of October, 2016 at 4:15:45 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 JOHN R PAYNE JR.
Signature of Authorized Person

Form No. 631
Revised 09/07

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