



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

**Foreign Non-Profit
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: 2017

1. Corporate ID No. 000847904

2. Name of Corporation Museum of Broadcast Technology, Inc.

3. State of Incorporation

State: MA

4. Corporate Address in Rhode Island

No. and Street: 144 MAIN STREET

City or Town: WOONSOCKET

State: RI

Zip: 02895

Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 115 DUMMER STREET

City or Town: BROOKLINE

State: MA

Zip: 02446

Country: USA

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

MAINTAIN AND OPERATE A MUSEUM OF EQUIPMENT USED IN RADIO AND TELEVISION BROADCAST STATIONS. THE MUSEUM IS LOCATED AT 144 MAIN STREET, WOONSOCKET, RHODE ISLAND 02895

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	PAUL R. BECK	71 CROSS STREET FOXBOROUGH, MA 02035 USA
TREASURER	THOMAS R. SPRAGUE	812 MEMORIAL DRIVE CAMBRIDGE, MA 02139 USA
CLERK	HENRY L. BERMAN	1335 R STREET, NW, APT. #1 WASHINGTON, DC 20009 USA

DIRECTOR	HENRY L. BERMAN	1335 R STREET, NW, APT. #1 WASHINGTON, DC 20009 USA
DIRECTOR	PAUL R. BECK	71 CROSS STREET FOXBOROUGH, MA 02035 USA
DIRECTOR	THOMAS R. SPRAGUE	812 MEMORIAL DRIVE CAMBRIDGE, MA 02139 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**

LLOYD R. GARIEPY 191 SOCIAL STREET, SUITE 280 WOONSOCKET , RI 02895

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

Signed this 4 Day of January, 2017 at 11:58:58 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 THOMAS R. SPRAGUE
Signature of Authorized Person

Form No. 631
Revised 09/07

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