



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2017

Filing Period: June 1 - June 30 • This report must be typed or printed legibly.

Filing Fee: \$20.00 • FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. <u>861132</u>		2. Exact name of the Corporation <u>Saint Andrew Catholic Ladies Guild, Inc.</u>			
3. State of Incorporation <u>Rhode Island</u>		4. Brief description of the character of business conducted in Rhode Island <u>Charitable Works and support of religious education</u>			
5. Principal office address <u>PO Box 1893</u>		City <u>Block Island</u>	State <u>RI</u>	Zip <u>02807</u>	
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name <u>Margaret M. O'Neill</u>			Vice-President Name <u>Lois Bendokas</u>		
Street Address <u>Box 836 Pilot Hill Rd.</u>			Street Address <u>Box A2 High St.</u>		
City <u>Block Island</u>	State <u>RI</u>	Zip <u>02807</u>	City <u>Block Island</u>	State <u>RI</u>	Zip <u>02807</u>
Secretary Name <u>Teressa Chmiel</u>			Treasurer Name <u>Susan C. Schaller</u>		
Street Address <u>Box 852 High St.</u>			Street Address <u>Box 1787 Spring St.</u>		
City <u>Block Island</u>	State <u>RI</u>	Zip <u>02807</u>	City <u>Block Island</u>	State <u>RI</u>	Zip <u>02807</u>
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name <u>Mary Donnelly</u>			Director Name <u>Margaret M. O'Neill</u>		
Street Address <u>Box 323 Old Town Rd.</u>			Street Address <u>Box 836 Pilot Hill Rd.</u>		
City <u>Block Island</u>	State <u>RI</u>	Zip <u>02807</u>	City <u>Block Island</u>	State <u>RI</u>	Zip <u>02807</u>
Director Name <u>Teressa Chmiel</u>			Director Name <u>Susan C. Schaller</u>		
Street Address <u>Box 852 High St.</u>			Street Address <u>Box 1787 Spring St.</u>		
City <u>Block Island</u>	State <u>RI</u>	Zip <u>02807</u>	City <u>Block Island</u>	State <u>RI</u>	Zip <u>02807</u>
8. REGISTERED AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 641.					

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

File Date _____

Check No _____

By: _____

FOR SECRETARY OF STATE USE ONLY

FILED

MAY 15 2017

BY 7063

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Susan C. Schaller 5/11/17
Signature of Officer or Authorized Representative Date

Susan C. Schaller, Treasurer
Print or Type Name of Officer or Authorized Representative