RI SOS Filing Number: 201744876360 Date: 6/5/2017 4:00:00 PM State of Rhode Island and Providence Plantations

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Department of State - Business Services Division

| Annual Report for the year: | 20.0 |
|-----------------------------|------|
| Non-Profit Corporation | 2017 |

→ Filing period: June 1 - June 30 → Filing Fee: \$20.00

-> Penalty: Additional \$25.00 fee if form is not filed by July 30.

| Entity ID Number | 2. Exact name of the Corporation | | | | | | |
|---|---|---|--|---------------|--|--|--|
| 793369 | Little Compto | n Assistance As | 350ciatio | N. | | | |
| 3. State of Incorporation | 5. Brief description of the character | 5. Brief description of the character of business conducted in Rhode Island Charitable purposes of benefitting and supporting | | | | | |
| RoI | regidents and we | orkers of rittle c | on a suppo | ccind | | | |
| 4. NAICS Code | short term emeral | and time was age | in the sol | bionaina | | | |
| 624190 | Short term emergency financial assistance for Director of Social Services | | | | | | |
| 6. Principal O⊟ce Address | | City | State | Zip | | | |
| P.O. BOX 253 | | rithe Compton | RI | 02837 | | | |
| 7. List ALL o⊡cers (names and add | lresses) | Check th | e box to indicate a | an attachment | | | |
| President Name Rev. Patrick Croudh | | Vice-President Name いのこ | | | | | |
| Street Address 7 OIN STOINE Chy | 0 ~ 7 | Street Address | | | | | |
| city Tivectan | State Zip C2879 | City | State | Zip | | | |
| Secretary Name 50NC Calling ha | | Treasurer Name Albert B. Stack | 0/21 | | | | |
| Street Address | Street Address Street Address | | _ 1 | | | | |
| city 10 Porth Tupelo | | City 2 High Meado | | | | | |
| Little Country | State Zip 02837 | Little Compton | State X | C283) | | | |
| 8. List ALL directors (naknes and ad | dresses). RI Corporations MUST lis | | ck the box to indicat | ···· | | | |
| Director Name 5000 Bulycendo | ort | Director Name Sandy Fart | | | | | |
| Street Address | | Street Address | 2001 | | | | |
| | State Road | 44 Botts Kock | | T | | | |
| City Compton | State Zip () 283!) | City Hile Comptan | State I. | 2ip 02837 | | | |
| Director Name Susan Chase | | Director Name Sr. Ellen Martin RSU | | | | | |
| Street Address Long Higher | Nay | Street Address 55 Ocean Dr.V | | | | | |
| | State Zip O2837 | City Little Compton | State | zig 02837 | | | |
| 9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641. | | | | | | | |
| Under penalty of perjury, I declare and a□ rm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct. | | | | | | | |
| This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treesurer, duly Authorized Representative, Receiver or Trustee. | | | | | | | |
| Name of O□cer/Authorized Represe | entative | · · · · · · · · · · · · · · · · · · · | Date | | | | |
| Albert B. St | debler | | May 31 | 2017 | | | |
| Signature of O cer/Authorized Representative FILED | | | | | | | |
| | | Alexander and alexander | | | | | |

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov



State of Rhode Island and Providence Plantations Department of State - Business Services Division

Annual Report for the year: 2017 Non-Pro¿t Corporation

-> Filing period: June 1 - June 30

→ Filing Fee: \$20.00

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| 7 - Grand, - Additional \$25.00 100 1 | | | | | | | |
|---|----------------------------|---------------------------------------|--------------------------------------|------------------------|---------------|--|--|
| Entity ID Number | 2. Exact name | of the Corporation | | | | | |
| 793369 | Little | Little Compton Assistance Association | | | | | |
| 3. State of Incorporation | 5. Brief descript | tion of the characte | er of business conducted in Rhode Is | land | | | |
| R.I | chantab | 16 borbose | 3 of power, 4ma an | ig 2015bort | ing | | |
| 4. NAICS Code | - Lesigenz | ican pure | KAR OF MITHEN CO | pd organ | pribuding | | |
| | Directo | of someto | Here of Lither Co Hervines ous | 2. stange | ber 1 | | |
| 6. Principal O⊡ce Address | | 04 10010 | City | State | Zip | | |
| P.O. Box 253 | | Little Compton | RI | 02831) | | | |
| 7. List ALL o□cers (names and ad | dresses) | 7.4 | | e box to indicate a | n attachment | | |
| President Name | | Vice-President Name | | | | | |
| Street Address | | Street Address | | | | | |
| City | State | Zip | City | State | Zip | | |
| Secretary Name | | | Treasurer Name | <u>.</u> | | | |
| Street Address | | Street Address | | | | | |
| City | State | Zip | City | State | Zip | | |
| 8. List ALL directors (names and ad | ddresses). RI Corp | porations MUST lis | | | | | |
| Director Name | | | Director Name | ck the box to indicate | an attachment | | |
| Rev. Beverley Edwards | | Rev. Lynn Cruille | | | | | |
| Street Address U 340 Main Street P.O. Box 491 | | | | | | | |
| Little Compton | State | Zip 02837 | City Compton | State R I | Zip 02837 | | |
| Director Name Revoca Flo | Director Name SUSAN SIBSON | 7 2 2 | 100001 | | | | |
| | | | Street Address 88 East Man Road | | | | |
| City the Compton | State | Zip 02837 | City Country | | Zip 02630 | | |
| | d. This information is | | | uire Jina Form 641. | | | |
| 9. Registered Agent in Rhode Island. This information is currently of record in the Department of State) Changes require Jing Form 641. Under penalty of perjury, I declare and all rm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct. | | | | | | | |
| This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee. | | | | | | | |
| Name of O□cer/Authorized Represe | entative | | | Date | | | |
| Albert B. Stackler May 31 2017 | | | | | 2017 | | |
| Signature of O□cer/Authorized Representative | | | | | | | |
| (MB. Xth) | | | | | | | |
| All TO: | | | | ~ 111 | | | |

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

JUN 0 5 2017