



**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

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 2017 JUN 21 AM 9:59

**NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR**

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. <b>506431</b>		2. Exact name of the Corporation <b>Burrillville Teachers' Association</b>			
3. State of Incorporation <b>Rhode Island</b>		4. Brief description of the character of business conducted in Rhode Island <b>Teacher Union (NEARI)</b>			
5. Principal office address <b>425 East Ave</b>		City <b>Harrisville</b>	State <b>RI</b>	Zip <b>02830</b>	
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name <b>Nicholas Servidio</b>			Vice-President Name <b>Steve Pickering</b>		
Street Address <b>187 Concord Street</b>			Street Address <b>2 Cathedral Court</b>		
City <b>Holliston</b>	State <b>MA</b>	Zip <b>01746</b>	City <b>Cumberland</b>	State <b>RI</b>	Zip <b>02864</b>
Secretary Name <b>Nancy Inzer</b>			Treasurer Name <b>Rosanna Cavanaugh</b>		
Street Address <b>41 Mill Pond Rd</b>			Street Address <b>20 Norwood Rd</b>		
City <b>Harrisville</b>	State <b>RI</b>	Zip <b>02830</b>	City <b>N. Smithfield</b>	State <b>RI</b>	Zip <b>02896</b>
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 <b>Nicholas Servidio</b>			Director Name <b>Steve Pickering</b>		
Street Address <b>187 Concord St</b>			Street Address <b>2 Cathedral Court</b>		
City <b>Holliston</b>	State <b>MA</b>	Zip <b>01746</b>	City <b>Cumberland</b>	State <b>RI</b>	Zip <b>02864</b>
Director Name <b>Nancy Inzer</b>			Director Name		
Street Address <b>41 Mill Pond Rd</b>			Street Address		
City <b>Harrisville</b>	State <b>RI</b>	Zip <b>02830</b>	City	State	Zip
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 <sup>RV</sup>

**FILED**

JUN 21 2017

*[Handwritten initials]*

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.

*[Handwritten Signature]*  
 Signature of Officer or Authorized Representative \_\_\_\_\_ Date \_\_\_\_\_

**Nancy Inzer / Secretary**  
 Print or Type Name of Officer or Authorized Representative