



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

Annual Report for the year:

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.

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1. Entity ID Number <b>108781</b>		2. Exact name of the Corporation <b>The Bristol Tree Society</b>	
3. State of Incorporation <b>Rhode Island</b>		5. Brief description of the character of business conducted in Rhode Island <b>Publishes an educational newsletter each year along with providing funds for tree planting &amp; educational tree guides</b>	
4. NAICS Code <b>813312</b>			
6. Principal Office Address <b>39 R State St</b>		City <b>Bristol</b>	State <b>RI</b>
		Zip <b>02809</b>	
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
President Name <b>Bob Aruda</b>		Vice-President Name <b>Raymond Payson</b>	
Street Address <b>159 High St</b>		Street Address <b>131 Ferry Rd</b>	
City <b>Bristol</b>	State <b>RI</b>	City <b>Bristol</b>	State <b>RI</b>
Zip <b>02809</b>		Zip <b>02809</b>	
Secretary Name		Treasurer Name <b>Jason Lavelle</b>	
Street Address		Street Address <b>39 R State St</b>	
City	State	City <b>Bristol</b>	State <b>RI</b>
Zip <b>02809</b>		Zip <b>02809</b>	
8. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
Director Name <b>Bill Clittick</b>		Director Name <b>Carol Gafford</b>	
Street Address <b>48 Church St</b>		Street Address <b>1081 Hope St</b>	
City <b>Bristol</b>	State <b>RI</b>	City <b>Bristol</b>	State <b>RI</b>
Zip <b>02809</b>		Zip <b>02809</b>	
Director Name <b>Bart Ferris</b>		Director Name	
Street Address <b>142 High St</b>		Street Address	
City <b>Bristol</b>	State <b>RI</b>	City	State
Zip <b>02809</b>		Zip	
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.			
<b>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.</b>			
<small>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</small>			
Name of Officer/Authorized Representative <b>Jason Lavelle / Treasurer</b>		Date <b>6/27/17</b>	
Signature of Officer/Authorized Representative <i>[Signature]</i>		<b>FILED</b>	
SIGN DOCUMENT HERE			

MAIL TO:  
Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: www.sos.ri.gov

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