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State of Rhode Island and Providence Plantations

## Department of State - Business Services Division

Annual Report for the year: 2017
Non-Profit Corporation

→ 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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2017 JUN 30 PM 2: 26

4. Entitle ID November	Io 5					
1. Entity ID Number 001068210	•	2. Exact name of the Corporation  The Providence Village of Phode Island				
		The Providence Village of Rhode Island				
3. State of Incorporation	4. Brief des	Brief description of the character of business conducted in Rhode Island				
RI	Provide community-based network of mutual support for seniors.					
5. Principal Office Address			City	State	Zip	
276 Angell Street			Providence	RI	02906	
6. List ALL officers (names a	and addresses)			Check the box to	ndicate an attachment	
President Name and Director: Patrick Mattingly			Vice-President Name Jim Maxwell, President Elect & Director			
Street Address 9 Church Street			Street Address 35 Halsey Streeet			
<sup>City</sup> Providence	State RI	<sup>Zip</sup> 02907	City Providence	State RI	<sup>Zip</sup> 02906	
Secretary Name and Director: Anne W. Connor			Treasurer Name and Director: Christine S. Miller			
Street Address 140 Power Street			Street Address One Wayland Avenue			
<sup>City</sup> Providence	State RI	<sup>Zip</sup> 02906	City Providence	State RI	<sup>Zip</sup> 02906	
7. List ALL directors (names	and addresses). I	RI Corporations MI	JST list at least THREE direc		to indicate an attachment	
Director Name Cyrus O <sup>e</sup> Neil			Director Name Jane Adler			
Street Address 28 Lafayette St			Street Address 71 Faunce Dr			
<sup>City</sup> Providence	State RI	<sup>Zip</sup> 02906	City Providence	State RI	<sup>Zip</sup> 02906	
Director Name Anna Cerutti			Director Name Nora Cohen			
Street Address 98 Arbor Dr			Street Address 552 Angell St			
City Providence	State RI	Zip 02908	City Providence	State RI	<sup>Zip</sup> 02906	
3. Registered Agent in Rhod	e Island. This inform	nation is currently of	record in the Department of Stat	e. Changes require filin	g Form 641.	
	declare and affire	n that I have exal	nined this report, including			
			tant Secretary, Treasurer, duly Author	rized Representative, Rece	iver or Trustee.	
Name of Officer/Authorized F			Date			
nne W. Connor, Secret	ary			June 30, 20	June 30, 2017	
ignature of Officer/Authoriza	d Representative			<u> </u>		
nne W Connor	1/2/	m/Z	Pightily signed by Anne W Connor DN: cn-Anne W Connor, o-The Providence VIII			

MAIL TO:

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

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED
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FORM 631 - Revised: 05/2016

The Providence Village of Rhode Island ID Number: 001068210

7. List ALL Directors (cont'd) - Attachment

Title	Individual Name First, Middle, Last, Suffix	Address	
Director	Deborah Dunning	255 Promenade Street Providence, RI 02908	
Director	Joseph K. Fisler	34 Luzon Avenue Providence, RI	
Director	Suzanne Francis	157 Waterman Street Providence, RI 02906	
Director	Bonnie Ryvicker	46 Alton Road Providence, RI 02906	
Director	Martha Wales	11 Arlington Avenue Providence, RI 02906	
Director	H. Philip West	35 Stanwood Street Providence, RI 02908	
Director	Laura Young	14 Manor Drive Barrington, RI 02806	