

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 20

Entity ID Number	2. Exact na	2. Exact name of the Corporation					
000138118	Tavern Hal	Tavern Hall Preservation Society, Inc.					
3. State of Incorporation	5. Brief des	5. Brief description of the character of business conducted in Rhode Island					
Rhode Island		Preservation, promotion, and development of the historical assets of the Village of Kingston and					
4. NAICS Code	the Town o	of South Kingstow	n.				
813212							
6. Principal Office Address			City	State	Zip		
PO Box 137			Kingston	RI	02881		
7. List ALL officers (names and				Check the box to indica	te an attachment		
President Name Edward Dettmann			Vice-President Name Mark Berman				
Street Address 238 Linden Drive			Street Address 2282 Kingstown Road				
City Kingston	State RI	^{Zip} 02881	City Kingston	State RI	Zip 02881		
Secretary Name Angelo Mendillo			Treasurer Name R. Choudary Hanumara				
Street Address 119 Cherry Road			Street Address 92 Spring Hill Road.				
^{City} Kingston	State RI	^{Zip} 02881	City Kingston	State RI	Zip 02881		
8. List ALL directors (names and	d addresses). RI (Corporations MUST	list at least THREE directors.	Check the box to ind	licate an attachment		
Director Name Gilbert Indeglia			Director Name Elizabeth Indeglia				
Street Address 2563 Kingstown Road			Street Address 2563 Kingstown Road				
City Kingston	State RI	^{Zip} 02881	City Kingston	State RI	^{Zip} 02881		
Director Name Louis Kirschenbaum			Director Name John Barbato				
Street Address 1783 South Road			Street Address 26 Old North Road				
City Kingston	State RI	Zip 02881	City Kingston	State RI	Zip 02881		
3. Registered Agent in Rhode Is	and. This informati	ion is currently of reco	ord in the Department of State. Ch	anges require filing Form (341.		
Under penalty of perjury, i dec statements, and that all staten	lare and affirm t	hat I have examin	ed this report, including any				
This report must be signed by either the F				Representative, Receiver or Tro	ustee.		
Name of Officer/Authorized Representative Edward Dettmann, President				Date June 29, 20	Date June 29, 2017		
ignature of Officer/Authorized R	epresentative						
Edward .	$\mathbf{x} \sim i\mathbf{I}$			40			

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov JUL Q 5 2017

FORM 631 - Revised: 06/2017

NAMES & ADDRESSES OF DIRECTORS OF TAVERN HALL PRESERVATION SOCIETY, INC. (Continued)

Nancy Hampton Beeley 21 George Street Wakefield, RI 02879

Ruth Liguori 3 Boxwood Court Peace Dale RI 02883

Laurent Fortin 31 Fortin Road Kingston, RI 02881

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ID 138118

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