



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.

|                                                                                                                                                                                                                    |             |                                                                                                                                           |                       |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|
| 1. Entity ID Number<br>30707                                                                                                                                                                                       |             | 2. Exact name of the Corporation<br>The Scituate Preservation Society, Inc                                                                |                       |
| 3. State of Incorporation<br>Rhode Island                                                                                                                                                                          |             | 5. Brief description of the character of business conducted in Rhode Island<br>Preservation & Education of Historical Records & Antifacts |                       |
| 4. NAICS Code<br>541720                                                                                                                                                                                            |             |                                                                                                                                           |                       |
| 6. Principal Office Address<br>706 Hartford Pike / P.O. Box 551                                                                                                                                                    |             | City<br>North Scituate                                                                                                                    | State<br>Rhode Island |
|                                                                                                                                                                                                                    |             | Zip<br>02857                                                                                                                              |                       |
| 7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>                                                                     |             |                                                                                                                                           |                       |
| President Name<br>William Frederickson                                                                                                                                                                             |             | Vice-President Name<br>Salvatore Lombardi                                                                                                 |                       |
| Street Address<br>73 Reptoad Rd                                                                                                                                                                                    |             | Street Address<br>117 Central Pike                                                                                                        |                       |
| City<br>N. Scituate                                                                                                                                                                                                | State<br>RI | City<br>N. Scituate                                                                                                                       | State<br>RI           |
| Zip<br>02857                                                                                                                                                                                                       |             | Zip<br>02857                                                                                                                              |                       |
| Secretary Name<br>Lucille Benmout                                                                                                                                                                                  |             | Treasurer Name<br>Miki Lombardi                                                                                                           |                       |
| Street Address<br>212 Old Plainfield Pike                                                                                                                                                                          |             | Street Address<br>117 Central Pike                                                                                                        |                       |
| City<br>N. Scituate                                                                                                                                                                                                | State<br>RI | City<br>N. Scituate                                                                                                                       | State<br>RI           |
| Zip<br>02857                                                                                                                                                                                                       |             | Zip<br>02857                                                                                                                              |                       |
| 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<br>William Frederickson                                                                                                                                                                              |             | Director Name<br>Salvatore Lombardi                                                                                                       |                       |
| Street Address<br>Same as Above                                                                                                                                                                                    |             | Street Address<br>Same as above                                                                                                           |                       |
| City                                                                                                                                                                                                               | State       | City                                                                                                                                      | State                 |
| Zip                                                                                                                                                                                                                |             | Zip                                                                                                                                       |                       |
| Director Name<br>Lucille Benmout                                                                                                                                                                                   |             | Director Name<br>Miki Lombardi                                                                                                            |                       |
| Street Address<br>Same as above                                                                                                                                                                                    |             | Street Address<br>Same as above                                                                                                           |                       |
| City                                                                                                                                                                                                               | State       | City                                                                                                                                      | State                 |
| Zip                                                                                                                                                                                                                |             | 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>        |             |                                                                                                                                           |                       |
| This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.                                                |             |                                                                                                                                           |                       |
| Name of Officer/Authorized Representative<br>                                                                                                                                                                      |             | Date<br>7-4-2017                                                                                                                          |                       |
| Signature of Officer/Authorized Representative<br>William Frederickson                                                                                                                                             |             |                                                                                                                                           |                       |

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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FORM 631 - Revised: 06/2017