



**State of Rhode Island and Providence Plantations
Office of the Secretary of State**

Fee: \$20.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Non-Profit Corporation
Annual Report**

Filing Period: June 1 - June 30

In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2017

1. Corporate ID No. 001660077

2. Name of Corporation Theta Theta House Corporation of Kappa Delta Sorority, Inc.

3. State of Incorporation

State: RI

ARTICLE III

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code
721310

4. Corporate Address in Rhode Island

No. and Street: 11 FRATERNITY CIRCLE
City or Town: KINGSTON

State: RI Zip: 02881 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

TO PROVIDE, EQUIP, MAINTAIN AND MANAGE FACILITIES PROVIDING A SUITABLE SOCIAL ENVIRONMENT FOR THE THETA THETA CHAPTER OF KAPPA DELTA SORORITY INCORPORATED, A VIRGINIA NOT-FOR-PROFIT CORPORATION, AND TO THAT END TO ACQUIRE BY GIFT, DEVISE, PURCHASE OR OTHERWISE, REAL AND PERSONAL PROPERTY, AND TO SELL, CONVEY, EXCHANGE, LEASE, MORTGAGE, PLEDGE OR OTHERWISE ENCUMBER SUCH PROPERTY, AND PERFORM ALL SUCH OTHER ACTS AS MAY BE NECESSARY OR ADVISABLE FOR THE SPECIFIC PURPOSE

HEREIN STATED. SUCH PROPERTY IS TO BE USED AS A LIVING OR MEETING PLACE TO INSPIRE OUR MEMBERS TO REACH THEIR FULL POTENTIAL; TO PREPARE OUR MEMBERS FOR COMMUNITY SERVICE, ACTIVE LEADERSHIP AND RESPONSIBLE CITIZENSHIP; TO CREATE OPPORTUNITIES FOR LIFETIME INVOLVEMENT THROUGH INNOVATIVE AND RESPONSIVE PROGRAMS, STRATEGIC COLLABORATIONS AND PARTNERSHIPS; AND TO FOSTER THE DEVELOPMENT OF KAPPA DELTA'S TIME-HONORED VALUES WITHIN THE CONTEXT OF FRIENDSHIP.

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	SHANNON POPIK HAMPSON	11 FRATERNITY CIRCLE KINGSTON, RI 02881 USA
TREASURER	CLAIRE PATRICIA STUCKEL	5205 THOLOZAN AVE SAINT LOUIS, MO 63109 USA
SECRETARY	LAURA FLEMING HELTON	3205 PLAYERS LANE MEMPHIS, TN 38125 USA
VICE PRESIDENT	CLAIRE PATRICIA STUCKEL	5205 THOLOZAN AVE SAINT LOUIS, MO 63109 USA
DIRECTOR	SHANNON POPIK HAMPSON	11 FRATERNITY CIRCLE KINGSTON, RI 02881 USA
DIRECTOR	CLAIRE PATRICIA STUCKEL	5205 THOLOZAN AVE SAINT LOUIS, MO 63109 USA
DIRECTOR	LAURA FLEMING HELTON	3205 PLAYERS LANE MEMPHIS, TN 38125 USA

8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

SHANNON HAMPSON 11 FRATERNITY CIRCLE KINGSTON , RI 02881

9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.

Signed this 9 Day of November, 2017 at 12:02:30 PM by the authorized person. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.

By CLAIRE STUCKEL
Signature of Authorized Person

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