State of Rhode Island and Providence Plantations Fee: \$20.00			
Office of the Secretary of State			
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. 000068858			
2. Name of Corporation <u>RHODE ISLAND STATE SOCIETY DAUGHTERS OF THE</u> <u>AMERICAN REVOLUTION</u>			
3. State of Incorporation			
State: <u>RI</u>			
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 <u>click here.</u>			
NAICS Code 6			
<u>611110</u>			
4. Corporate Address in Rhode Island			
No. and Street: 43 DIAMOND HILL ROAD			
City or Town: BRADFORD State: RI Zip: 02808 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			
HISTORIC PRESERVATION, PROMOTION OF EDUCATION, PATRIOTIC ENDEAVOR.			
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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete			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	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	BARBARA WATROUS	43 DIAMOND HILL ROAD
		BRADFORD, RI 02808 USA
DIRECTOR	ELLEN GRIFFIN	92 CEDARWOOD LANE
		HOPE VALLEY, RI 02832 USA
	d by either the President, Vice	President, Secretary, Assistant
9. This report must be signed Secretary, Treasurer, duly Signed this 9 Day of Februa signature of the individual o acknowledgement of the sign individual's act and deed or	d by either the President, Vice Authorized Representative, ary, 2018 at 11:12:33 AM by or individuals signing this ins matory, under penalties of pe	e President, Secretary, Assistant Receiver, or Trustee. y the authorized person. This electronic trument constitutes the affirmation or prjury, that this instrument is that pany, and that the facts stated herein are
D. This report must be signed Secretary, Treasurer, duly Signed this 9 Day of Februa Signature of the individual of acknowledgement of the sign ndividual's act and deed or rue, as of the date of the ele	d by either the President, Vice Authorized Representative, ary, 2018 at 11:12:33 AM by or individuals signing this ins natory, under penalties of pe the act and deed of the comp ectronic filing, in compliance	e President, Secretary, Assistant Receiver, or Trustee. y the authorized person. This electronic trument constitutes the affirmation or rjury, that this instrument is that pany, and that the facts stated herein are

Form No. 631 Revised 09/07

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