



**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:** 2018

**1. Corporate ID No.** 000028535

**2. Name of Corporation** The Chaminade Club of Providence, Rhode Island

**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

6

711130

**4. Corporate Address in Rhode Island**

No. and Street: 50 LINCOLN AVE

City or Town: BARRINGTON

State: RI

Zip: 02806

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 ORGANIZE AND ENCOURAGE MUSIC PERFORMANCE, EDUCATION, AND APPRECIATION WHILE UPHOLDING AND RAISING THE MUSICAL STANDARDS OF THE COMMUNITY

**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**Incorporator is no longer applicable; please delete**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**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	ROSALIND Y CHUA	139 HIGH ST BRISTOL, RI 02809 USA
TREASURER	CATHERINE C BLEDSOE	50 LINCOLN AVE BARRINGTON, RI 02806 USA
SECRETARY	LINNEA C WINCZE	18 BROADVIEW DR BARRINGTON, RI 02806 USA
VICE PRESIDENT	GLENDA SAKALA	29 WILLIAMS AVE TIVERTON, RI 02878 USA
DIRECTOR	DEIRDRE J LAVALLEE	25 RENA ST NORTH PROVIDENCE, RI 02911 USA
DIRECTOR	NANCY WEISS FRIED	10 PLEASANT HILL RD CRANSTON, RI 02910 USA
DIRECTOR	FRANCES L FOISY	578 FRUIT HILL AVE NORTH PROVIDENCE, RI 02911 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**

CATHERINE C. BLEDSOE 50 LINCOLN AVENUE BARRINGTON , RI 02806

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

**Signed this 4 Day of June, 2018 at 3:55:38 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 CATHERINE BLEDSOE  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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