



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2018

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 30.

1. Entity ID Number 104619		2. Exact name of the Corporation East Providence Lions Charities, Inc.		
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island Raising & Disbursing Funds for Charitable Purposes in the Community		
4. NAICS Code 813319 - Other Social Advoc				
6. Principal Office Address PO Box14431		City East Providence	State RI	Zip 02914
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>				
President Name Fred Nowosielski		Vice-President Name Richard Primmer		
Street Address 2447 Chestnut Street		Street Address 140 Don Ave.		
City North Dighton	State MA	Zip 02764	City Rumford	State RI Zip 02916
Secretary Name Richard J. Wood		Treasurer Name David Kent		
Street Address 44 Benedict Street		Street Address 8 McGraw Court		
City Riverside	State RI	Zip 02915	City East greenwich	State RI Zip 02818
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>				
Director Name Deb Nowosielski		Director Name Wendy Wood-Hubbard		
Street Address 2447 Chestnut Street		Street Address 73 Marnoch Drive		
City North Dighton	State MA	Zip 02764	City Seekonk	State MA Zip 02771
Director Name Gordon Hubbard		Director Name		
Street Address 73 Marnoch Drive		Street Address		
City Seekonk	State MA	Zip 02771	City	State Zip
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.				
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.				
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>				
Name of Officer/Authorized Representative Richard J. Wood			Date June 5, 2018	
Signature of Officer/Authorized Representative <i>Richard J. Wood</i>				

FILED

MAIL TO:
 Division of Business Services

JUN 07 2018
 BY 1215 DS