



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

**FILED**

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.

JUN 07 2018  
 BY 301 [Signature]

1. Entity ID Number <b>506763</b>		2. Exact name of the Corporation <b>Newport County Retired Teachers' Association, Inc.</b>			
3. State of Incorporation <b>RI</b>		5. Brief description of the character of business conducted in Rhode Island <b>To raise money to provide scholarships to Newport County students</b>			
4. NAICS Code <b>813920 - Professional Orgar</b>					
6. Principal Office Address <b>15 Oliver Hazard Perry Rd</b>		City <b>Portsmouth</b>	State <b>RI</b>	Zip <b>02871</b>	
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Peg Bugara</b>		Vice-President Name <b>Arlene Hicks</b>			
Street Address <b>36 Wild Cherry Dr</b>		Street Address <b>29 Abbey Rd</b>			
City <b>Little Compton</b>	State <b>RI</b>	Zip <b>02837</b>	City <b>Wakefield</b>	State <b>RI</b>	Zip <b>02879</b>
Secretary Name <b>Rita Wood</b>		Treasurer Name <b>Linda Becker</b>			
Street Address <b>47 Brown Terrace</b>		Street Address <b>15 Oliver Hazard Perry Rd</b>			
City <b>Portsmouth</b>	State <b>RI</b>	Zip <b>02871</b>	City <b>Portsmouth</b>	State <b>RI</b>	Zip <b>02871</b>
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 <b>Joyce McKale</b>		Director Name <b>Shirley Ripa</b>			
Street Address <b>55 Brook St</b>		Street Address <b>69 Bay Ridge Dr</b>			
City <b>Barrington</b>	State <b>RI</b>	Zip <b>02806</b>	City <b>Middletown</b>	State <b>RI</b>	Zip <b>02842</b>
Director Name <b>Victoria Johnson</b>		Director Name <b>Dennis Velozo</b>			
Street Address <b>487 Union St</b>		Street Address <b>79 "O" Drive</b>			
City <b>Portsmouth</b>	State <b>RI</b>	Zip <b>02871</b>	City <b>Westport</b>	State <b>RI</b>	Zip <b>02890</b>
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>					
<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 <b>Linda K. Becker</b>				Date <b>6/1/18</b>	
Signature of Officer/Authorized Representative 					