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			
(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. 000505401			
2. Name of Corporation The Friends of the Charlestown Animal Shelter Inc.			
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			
813312			
4. Corporate Address in Rhode Island			
No. and Street: <u>50 SAND HILL ROAD</u>			
City or Town:CHARLESTOWNState: RIZip:02813Country: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			
THE DIDDORE OF THE EDIENDS OF THE CHADI ESTOWNIANIMAL SHELTED INC. IS TO			
THE PURPOSE OF THE FRIENDS OF THE CHARLESTOWN ANIMAL SHELTER, INC., IS TO HELP STRAY, ABANDONED, HOMELESS AND INJURED ANIMALS AT THE			
CHARLESTOWN ANIMAL SHELTER. THE ORGANIZATION IS COMMITTED TO HELPING			
THESE ANIMALS BY PROVIDING: SPAYING AND NEUTERING VACCINATIONS, VETERINARY CARE AND MEDICAL TREATMENT SPECIAL IZED FOOD, SUDDIUES AND			
<u>VETERINARY CARE AND MEDICAL TREATMENT SPECIALIZED FOOD, SUPPLIES AND</u> BEHAVIORAL TRAINING ENHANCEMENTS TO THE ANIMAL'S QUALITY OF LIFE WHILE			
AT THE SHELTER EDUCATION OF THE PUBLIC REGARDING THE HUMANE TREATMENT			

AND CARE OF ANIMALS AND THE IMPORTANCE OF SPAYING AND NEUTERING.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	NANCY KOHLER	4299 SOUTH COUNTY TRAIL CHARLESTOWN, RI 02813 USA
TREASURER	SUSAN SEWALL	119 PECKHAM HOLLOW RD CHARLESTOWN, RI 02813 USA
SECRETARY	JODY WARD	17 PATTON ST COVENTRY, RI 02816 USA
DIRECTOR	SUSAN SEWALL	119 PECKHAM HOLLOW ROAD CHARLESTOWN, RI 02813 USA
DIRECTOR	JODY WARD	17 PATTON STREET COVENTRY, RI 02816 USA
DIRECTOR	NANCY KOHLER	4299 SOUTH COUNTY TRAIL CHARLESTOWN, RI 02813 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

NANCY KOHLER 50 SAND HILL ROAD CHARLESTOWN, RI 02813

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

Signed this 19 Day of June, 2018 at 11:16:28 AM 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 JODY WARD

Signature of Authorized Person

Form No. 631 Revised 09/07

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