



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.

FILED *20*

JUN 19 2018

BY 705

1. Entity ID Number <u>000085867</u>		2. Exact name of the Corporation <u>Weavers' Guild of Rhode Island</u>			
3. State of Incorporation <u>Rhode Island</u>		5. Brief description of the character of business conducted in Rhode Island <u>hand weaving, spinning, dyeing and related activities in the fiber art</u>			
4. NAICS Code <u>611610</u>					
6. Principal Office Address <u>21 Boulder Drive</u>			City <u>Carolina</u>	State <u>RI</u>	Zip <u>02812</u>
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name <u>Mary Brunell</u>			Vice-President Name <u>Lynn Morriseau</u>		
Street Address <u>1085 Hill Rd</u>			Street Address <u>41 Ingraham St</u>		
City <u>Pascoag</u>	State <u>RI</u>	Zip <u>02859</u>	City <u>Attleboro</u>	State <u>MA</u>	Zip <u>02703</u>
Secretary Name <u>Liz Hill</u>			Treasurer Name <u>Gretchen White</u>		
Street Address <u>90 Allen Ave</u>			Street Address <u>21 Boulder Dr</u>		
City <u>Wakefield</u>	State <u>RI</u>	Zip <u>02879</u>	City <u>Carolina</u>	State <u>RI</u>	Zip <u>02812</u>
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 <u>Mary Brunell</u>			Director Name <u>Lynn Morriseau</u>		
Street Address <u>1085 Hill Rd</u>			Street Address <u>41 Ingraham St</u>		
City <u>Pascoag</u>	State <u>RI</u>	Zip <u>02859</u>	City <u>Attleboro</u>	State <u>MA</u>	Zip <u>02703</u>
Director Name <u>Gretchen White</u>			Director Name		
Street Address <u>21 Boulder Dr</u>			Street Address		
City <u>Carolina</u>	State <u>RI</u>	Zip <u>02812</u>	City	State	Zip
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 631.					
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 <u>Gretchen White</u>					Date <u>6/18/18</u>
Signature of Officer/Authorized Representative <u>Gretchen White</u>					SIGN DOCUMENT HERE

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov