



**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.** 000111759

**2. Name of Corporation** Burrillville Land Trust

**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   
813312

**4. Corporate Address in Rhode Island**

No. and Street: P.O. BOX 506  
City or Town: HARRISVILLE State: RI Zip: 02830 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 IDENTIFY AND PRESERVE AGRICULTURAL, SCENIC OR HISTORIC LAND, NATURAL RESOURCES, AND ENDANGERED SPECIES THROUGH LAND ACQUISITION AND PROTECTION

**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**Incorporator is no longer applicable; please delete**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
SECRETARY	DORIS ALBERG	18 HIGHLAND AVENUE LINCOLN, RI 02865 USA
PRESIDENT	PAUL ROSELLI	665 MAUREEN CIRCLE MAPLEVILLE, RI 02839- USA
DIRECTOR	DORIS ALBERG	18 HIGHLAND AVENUE LINCOLN, RI 02865 USA
DIRECTOR	PAUL ANTHONY ROSELLI	665 MAUREEN CIRCLE MAPLEVILLE, RI 02839 USA
DIRECTOR	MICHAEL LAMOUREUX	608 CAMP DIXIE ROAD PASCOAG, RI 02859 USA
DIRECTOR	LURIE ESPONSOSA	63 MOWRY STREET HARRISVILLE, RI 02830 USA
DIRECTOR	CARLO MENCUCCI	1777 VICTORY HIGHWAY HARRISVILLE, RI 02830 USA
DIRECTOR	DONALD WATERMAN	330 WEST ROAD HARRISVILLE, RI 02830 USA
DIRECTOR	BETTY MENCUCCI	1777 VICTORY HIGHWAY HARRISVILLE, RI 02830 USA
DIRECTOR	CINDY CROOK-PICK	700 CHERRY FARM ROAD HARRISVILLE, RI 02830 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**

PAUL ROSELLI 665 MAUREEN CIRCLE MAPLEVILLE , RI 02839

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

**Signed this 22 Day of July, 2018 at 9:05:05 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 PAUL ROSELLI  
Signature of Authorized Person

Form No. 631  
Revised 09/07