



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

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 2018 JUL 30 AM 11:06

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 <b>789946</b>		2. Exact name of the Corporation <b>Tigersden</b>	
3. State of Incorporation <b>RI</b>		5. Brief description of the character of business conducted in Rhode Island <b>Tigersden Practices TNK, IN Return we help the community by spaying unwanted felines, in addition we help with owned pets in the event of job loss etc</b>	
4. NAICS Code <b>99999</b>			
6. Principal Office Address <b>55 Caporal Street</b>		City <b>Cranston</b>	State <b>RI</b>
		Zip <b>02910</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>Melissa Davis</b>		Vice-President Name <b>James Petrella</b>	
Street Address <b>55 Caporal Street</b>		Street Address <b>652 Public Street</b>	
City <b>Cranston</b>	State <b>RI</b>	City <b>Providence</b>	State <b>RI</b>
	Zip <b>02910</b>		Zip <b>02905</b>
Secretary Name		Treasurer Name <b>Melissa Davis</b>	
Street Address		Street Address <b>55 Caporal Street</b>	
City	State	City <b>Cranston</b>	State <b>RI</b>
	Zip <b>02910</b>		Zip <b>02910</b>
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>			
Director Name <b>Jeanne Draxler</b>		Director Name <b>Barthel Messarone</b>	
Street Address <b>521 North 18th Street</b>		Street Address <b>166 Hobson Ave</b>	
City <b>New Hyde Park</b>	State <b>NY</b>	City <b>North Providence</b>	State <b>RI</b>
	Zip <b>11040</b>		Zip <b>02911</b>
Director Name <b>John Light</b>		Director Name	
Street Address <b>55 Caporal Street</b>		Street Address	
City <b>Cranston</b>	State <b>RI</b>	City	State
	Zip <b>02910</b>		Zip
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>			
<small>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee</small>			
Name of Officer/Authorized Representative <b>Melissa Davis</b>			Date <b>7/28/18</b>
Signature of Officer/Authorized Representative <i>Melissa Davis</i>			

AUG 9 2018 11:08  
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**FILED**

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BY **HL 336639**