



State of Rhode Island and Providence Plantations

## Department of State - Business Services Division

## Annual Report for the year:

## Non-Profit Corporation

2018

→ Filing period: June 1 - June 30

→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by July 30.

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CORPORATIONS DIV

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|                                                                                                                                                                                                      |             |                                                                                                                                                                                                   |                             |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|
| 1. Entity ID Number<br>000030442                                                                                                                                                                     |             | 2. Exact name of the Corporation<br>Rhode Island Lions Sight Foundation, Inc                                                                                                                      |                             |
| 3. State of Incorporation<br>RI                                                                                                                                                                      |             | 5. Brief description of the character of business conducted in Rhode Island<br>Non-profit civic organizations that focuses on the needs of individuals in RI who are blind and visually impaired. |                             |
| 4. NAICS Code<br>999999                                                                                                                                                                              |             |                                                                                                                                                                                                   |                             |
| 6. Principal Office Address<br>35 Glen Drive                                                                                                                                                         |             | City<br>Warwick                                                                                                                                                                                   | State<br>RI<br>Zip<br>02889 |
| 7. List ALL officers (names and addresses). Check the box to indicate an attachment <input type="checkbox"/>                                                                                         |             |                                                                                                                                                                                                   |                             |
| President Name<br>Domingos Branco                                                                                                                                                                    |             | Vice-President Name<br>Francine Murphy-Brillon                                                                                                                                                    |                             |
| Street Address<br>6 Westgate Rd.                                                                                                                                                                     |             | Street Address<br>51 Cobble Hill Rd.                                                                                                                                                              |                             |
| City<br>Cumberland                                                                                                                                                                                   | State<br>RI | City<br>Lincoln                                                                                                                                                                                   | State<br>RI                 |
| Zip<br>02864                                                                                                                                                                                         |             | Zip<br>02865                                                                                                                                                                                      |                             |
| Secretary Name<br>Linda Hughes                                                                                                                                                                       |             | Treasurer Name<br>Michael Haws                                                                                                                                                                    |                             |
| Street Address<br>35 Glen Drive                                                                                                                                                                      |             | Street Address<br>14 Harbor Village Drive                                                                                                                                                         |                             |
| City<br>Warwick                                                                                                                                                                                      | State<br>RI | City<br>Middletown                                                                                                                                                                                | State<br>RI                 |
| Zip<br>02889                                                                                                                                                                                         |             | Zip<br>02842                                                                                                                                                                                      |                             |
| 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<br>William Walsh                                                                                                                                                                       |             | Director Name<br>Scott Surdot                                                                                                                                                                     |                             |
| Street Address<br>1650 Superior View Blvd.                                                                                                                                                           |             | Street Address<br>164 Flintstone Rd.                                                                                                                                                              |                             |
| City<br>N. Providence                                                                                                                                                                                | State<br>RI | City<br>Narragansett                                                                                                                                                                              | State<br>RI                 |
| Zip<br>02904                                                                                                                                                                                         |             | Zip<br>02882                                                                                                                                                                                      |                             |
| Director Name<br>James Clarke                                                                                                                                                                        |             | Director Name<br>Kenneth Barthelmy                                                                                                                                                                |                             |
| Street Address<br>7 Keesh Pond Dr                                                                                                                                                                    |             | Street Address<br>155 Trout Brook Lane                                                                                                                                                            |                             |
| City<br>Chepachet                                                                                                                                                                                    | State<br>RI | City<br>Hope                                                                                                                                                                                      | State<br>RI                 |
| Zip<br>02814                                                                                                                                                                                         |             | Zip<br>02831                                                                                                                                                                                      |                             |
| 9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.                                                            |             |                                                                                                                                                                                                   |                             |
| 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. |             |                                                                                                                                                                                                   |                             |
| This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.                                  |             |                                                                                                                                                                                                   |                             |
| Name of Officer/Authorized Representative<br>Linda Hughes                                                                                                                                            |             |                                                                                                                                                                                                   | Date<br>9/4/18              |
| Signature of Officer/Authorized Representative<br>Linda Hughes                                                                                                                                       |             |                                                                                                                                                                                                   |                             |

MAIL TO:  
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FORM 631 - Revised: 11/2017