RI SOS Filing Number: 201878266680 Date: 9/26/2018 4:00:00 PM

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.

1. Entity ID Number	2. Exact name of the Corporation
90617	**Rhode Island Society for Human Resource Managemen**
3. State of Incorporation: **Rhode Island**	5. Brief description of the character of business conducted in Rhode Island: **To Create opportunities for the exchange of ideas on current problems confronting the human resources professional.**
4. NAICS Code: **813920 - Professional Organiza**	

6. Principal Office Address	City	State	Zip
100 Metro Center Blvd	**Warwick**	**RI**	**02886**

7. List ALL officers (names and addresses) — Check the box to indicate an attachment ☐

President Name: **Cynthia Butler**			Vice-President Name: **Raymond Dutelle, Jr.**		
Street Address: **100 Metro Center Blvd**			Street Address: **100 Metro Center Blvd**		
City: **Warwick**	State: **RI**	Zip: **02886**	City: **Warwick**	State: **RI**	Zip: **02886**
Secretary Name: **Kimberly Cordeiro**			Treasurer Name: **Patricia Lyons**		
Street Address: **100 Metro Center Blvd**			Street Address: **100 Metro Center Blvd**		
City: **Warwick**	State: **RI**	Zip: **02886**	City: **Warwick**	State: **RI**	Zip: **02886**

8. List ALL directors (names and addresses). RI Corporations **MUST** list at least **THREE** directors. — Check the box to indicate an attachment ☐

Director Name: **Cynthia Butler**			Director Name: **Raymond Dutelle, Jr.**		
Street Address: **100 Metro Center Blvd**			Street Address: **100 Metro Center Blvd**		
City: **Warwick**	State: **RI**	Zip: **02886**	City: **Warwick**	State: **RI**	Zip: **02886**
Director Name: **Patricia Lyons**			Director Name: **Kimberly Cordeiro**		
Street Address: **100 Metro Center Blvd**			Street Address: **100 Metro Center Blvd**		
City: **Warwick**	State: **RI**	Zip: **02886**	City: **Warwick**	State: **RI**	Zip: **02886**

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	Date
Patricia A. Lyons	9/25/2018

Signature of Officer/Authorized Representative: Patricia A Lyons

SIGN DOCUMENT: **FILED**

SEP 26 2018

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

FORM 631 - Revised: 11/2017