

0907

FOR SECRETARY OF STATE USE ONLY

Check No.

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Division 100 North Main Sirvet Providence, RI 02903-1335 401.222.3040

individuo ne moden, secretary of state

NON-PROFIT (	CORPORATI	ON ANNUAL I	REPORT FOR TH	E YEAR	2005		
Filling Period: June 1 - J.	•	g Fee: \$20.00					
(FORM MUST BE TYPED OR I	_ <del>_</del>		<u></u>	· · · · · · · · · · · · · · · · · · ·			
1 Corporate ID No. <b>26716</b>	2. Name of Corporate The Humane Associ	1077 ation of Northwestern Rhode	Island, Inc.				
3 State of Incorporation	1	in Rhode Island - Street Addr		City	Zip		
RHODE ISLAND	85 Mais	<u>1 5+                                   </u>		Pascucy	02859		
5 Foreign corporation. Enter	principal office address		City	State	Zip		
6. Brief Description of the characteristic SHELTERING AND ADOI			Island				
			CHMENT) [] FILL IN SPACE	E DEEODE HEINO ATT	'A CHARAITC		
President Name		.nv. ( x nvx 10x x11x	Vice President Name	S DEFORE USING AT	ACHRENTS		
Phyllis A. Der			Rachol M	7 CX			
Street Address			Street Address	1 (	-		
65 North Sho	Re Drive	70		treet	· · · · · · · · · · · · · · · · · · ·		
Glendale	State	02876	Hudson	MG	01749		
Donna m Medeiros			Treasure Name Christine Pitts				
965 Greenvil	Le Ave	•	22 Colonial Drive				
Greenville	State RT	21p 02828	Harrisville	state R+	OD830		
			rachmènt)∏ fill in space ) <i>corporation <u>shall n</u>g</i>				
Director Name	TORS OF A DOMES	THE (KHODE ISLAND	Director Name	<u>I BE LESS THAN TH</u>	<u>KEE (3)</u> . K.I.G.L. /-0-23		
Burbara K	elner		Doris Le	mos			
Sirry Address Box 561		- 11	Street Address PU BUX 3				
Chepachet	State RT	2ip 03814	Greenville	State 7	0)878		
Director Name Judyh Sil	ver		Director Name		100.00		
Sireel Address	Road		Sirect Address				
310 burgy	State	Z(p = 5 )	City	State	700		
N. Scitacle	RI	10385 +			Zip		
9. REGISTERED AGENT 1 Agent Name	N RHODE ISLAND	· DO NOT ALTER - Cha	inges require filing of Ford	n 641 - R.I.G.L. 7-6-13	3 / 7-6-78		
PHYLLIS A. DORR			Address				
Address	<del></del>		85 MAIN STREET	Zip			
P.O. BOX 355		PASCOAG 02859-					
This report must I	e signed in ink by e	either the President, Vic	e President, Secretary, Assista	nt Secretary, Treasurer	Receiver or Trustee		
1 (85)18 118	1 <b>3 8</b> 1111 18881 11			•			
			•				
			Under penalty of a	crium I declare and affi-	m that I have examined this		
<del></del>	26716		, ,	• •	is and statements, and that all		
(g-le	-07		/ 11	d hereinjage true and com			
File Date		_	TIMUI LI	LHIA	6/2/05		



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

100 North Main Street

Providence, RI 02903-1335 401.222.3040

Corporations Division

Matthew A. Brown, Secretary of State

### NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR S

Filing Period: June 1 - June 30 • Filing Fee: \$20.00 (FORM MUST BE TYPED OR PRINTED IN BIACK) 2. Name of Corporation outhwestern 7.ip r principal office address City 5. Brief Description of the character of the affairs which are actually conducted in Rhode Island NAMES AND ADDRESSES OF THE OFFICERS: ( 01745 03826 State 02830 ०१६) ह MES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23 Director Name ርን&ታይ Street Address 07857 REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78 Zip This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

File Date FOR SECRETARY OF STATE USE O

Under genalty of perjury, I declare and affirm that I have ex	camined this
report/including any accompanying schedules and statements	, and that all
statements contained herein sign true and correct.	1 1
Flyllis U. J 0/	<i>&gt;404</i>
Signature of Officer	Bote
thyll3 A Dorr	
Print pc Type Name of Officer	
thesiden t	
Title of Officer	

## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

ite of Incorporation 4. Corporate addi	VU ASSOCIATI	on of North U		I Jnc
no Le Island 85 V reign corporation: Enter principal office addres	ilah St	City	Pascage State	, 0785° zip
N / / f of Description of the character of the affairs wh				
incitering and adames and adames and addresses of the opi			S BEFORE USING AT	TACUMENTS
leni Name ~4113 A Dorr		Nice President Name RACHEL W	) ( ox	
Address North Shore Div	ف	Street Address Mariun	5+	
lendale State	210 J. 8 J.C	Hudson	State MG	01749
any Name Medeiros	, , , , , , , , , , , , , , , , , , ,	Treasurer Name Christine	Pitts	
Address Greenville	Anne	Street Address		
eenville RI	86860°	Harrisville	State	Zp 26
ames and addresses of the dir	ECTORS CX BOX FOR A	TTACIONENT) [] FILL IN SPAC		
THE NUMBER OF DIRECTORS OF A D	IGMESTIC (RHODE ISLAM	D) CORPORATION SHALL NOT Director Name	BE LESS THAN THRE	E (3).R.L.G.L.7-6-23
urbara Kelner		Doris Ler	noS	
0 BOX 561		PO BOX 3	3 <i>6</i>	
epachet store	09814	Greenville	State	5080
Judith Silver	•	Director Name	Bestice in	0 = 3
Address	1	Street Address	Frim R.	1 0
10 Bungy Road	<sup>Ziρ</sup> υλ 857	Dr. rrisvillo	State	Zip 3.1
GISTERED AGENT IN RHODE ISLA.	ND DO NOT ALTER- Cha		m 641 -R.I.GL7-6-	13/7-6-78
hyllis A Dorr		95 Main	51	
BAX 355		Pascoas	Zip	) 855
wonet must be signed in int to wish	and by Dunidant Vian D	resident, Secretary, Assistant		

		this report, including a	ny accompanying sche	
FILED		and that all statements	contained herein are to	nue and correct
File Date	100 ES 10 45 10.	Mullis	_(1A_	6/26/04
Check No. AUG 2 5 2004	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Signature of Officer	4 (2)	Date V
By McLugso	With the state of	Frint or Type Name of O)	Micer /	
· · · · · · · · · · · · · · · · · · ·		Tule of Officer	n 1	Form 631 Rev. 6/02
<u> </u>	•-	* ** ·-		1011E 031 REV. 0/02



## NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002 Filing Period: June 1 - June 30 Filing Fee: \$20.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)	and market, and decembers were in the second the market market and the second control of	*****************	anga an ing mga mga mga mga mga ang mg
1. Corporate ID No. 2. Name of Corporation  2. Name of Corporation  Humane Associa	tran of North	nwestern	RIITY
3. Sigle of Incorporation 4. Corporate address in Rhode Island - Street Addr Rhode Island 85 Main St	£33	Paxoca	12855
5. Foreign corporation: Enter principal office address	City	State	Zip
6. Brief Description of the character of the affairs which are actually conducted jn Ri	hode Island		
Sheltering and adoption of	home less all		
7. NAMES AND ADDRESSES OF THE OFFICERS CX BOX FOR ATT.	Vice President Name	•	CHMENTS
Phyllis A Dorr	Street Address	•	
65 N. Shore Drive	17 Core	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	• • • • • • • • • • • • • • • • • • • •
Glendale State 21 02826	Pterri3ville	RI	01830
Secretary Name Donna Me Levos	Treasures Name Kachel I Street Address	M Cox	•
965 Greenville Aul	Street Address Marion	n st	
Greenville state 2 07878	Hudson	State (A)	ZP01749
8. NAMES AND ADDRESSES OF THE DIRECTORS CAT BOX FOR A	iticosori Piccimento		r riggeres en en la tres Öttswand
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND Director Name	CORPORATION SHALL NOT I	BE LESS THAN THREE I	3).R.L.G.L. 7-6-23
Barbara Kelner	Don's Len	പര്	e on
POBOX 561	Street Address		The same
Chepachet State RI 200814	"Greenville		24p 8 28
Director Name	Director Name	_	ີ່ພໍ່ ຕໍ່
Judith Silver	Barbara 1		
310 Bungy Road	52 Steere	State	2, 5
Scituale Rt 08857	Harrisville	rui - revonur emiliana acab u	02830
9. REGISTERED AGENT IN RHODE ISLAND DO NOT ALTER- CHAR	Address	m 641 -R.I.GL 7-6-137	7-6-78
Thyllis A Durr	85 Main s	ST ?	
PD BOX 355	Pascuas	00)8	159
This report must be signed in ink by either the President, Vice Pri	esident, Secretary, Assistant	Secretary, Treasurer	Receiver or Trustee
Same 1 G have there	Under penalty of penjury, this report, including any		
·	and thet all statements co		
File Date AUG 25 2001	Mylles	Ulfa	6/26/04
Check No. BVM 130130	Phy 1117	A Dorr	·
By:	Print or Type Name of Office	er = = = :	
FOR SECRETARY OF STATE USE ONLY	Tule of Officer		Form 631 Rev. 6/02

## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

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NON-PROFIT	CORPORA	TION ANNUAL	DEPODT FO	ID THE V	EAD ANOL	
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Filina Pariod• Iuna 1 -	. Iuno 30 🛎 🛭 Fill	na Fao: \$20.00				

Filing Period: June 1 - Jur FORM MUST BE TYPED OR P	RINTED IN BLACK)				
1. Corporate ID No. 3. State of Incorporation	2. Name of Carporation Human	e Associatio e Rhode Island -Street Add	n of Northwes	lem RI I	nC
3. State of Incorporation Rhode Island			lress	Ta Scous	02859
5. Foreign corporation: Enter pr			City	State	Zip
6. Brief Description of the charac				<u> </u>	The second secon
Sheltering 7. NAMES AND ADDRESS			MELES PES MICHIMENT)   FILL IN SPACE	es before using att.	CUMENTS
President Name Physics A Street Addless	Dorr		Vice President Name Lestie Rac	ucci	
Street Addless 65 North Sho	ve Drive		Street Address Cove R		
Glendale	State P.I.	08096	Harrisville	Ctata	02836
Donna Mela			Treasurer Name Dawn Fri	22011	
Steen Address Greeni	ille Ave		Street Address 52 Steere		ad
Greenville	State	7ip 07678	Harrisville	Crata	<sup>Zip</sup> 03ε30
8. NAMES AND ADDRESS	ES OF THE DIREC	TORS CX BOX FOR A	TTACTIMENT)   FILE IN SPA D) CORPORATION SHALL NOT	CES BEFORE USING AT	FACHMENTS ""
Director Name	The second of th		Director Name	DE LEGG TONG TORKE	13).R.t.G.t. 7-0-23
Barbarg Ke			Street Address	nos	
CIN POBOX SU	State	Zin	PO Box 3	36 State	£70
Chepuchet	RI	11360	Greenville	RI	C28 8 8 C
Director Name Tudith Sil	lver	dedices of a ddag ddag light light of the control o	Burbara 7	Buragine	
310 Bunge	1 Road	ench _combook.cd word char subsider	Street Address Steeve	Form Road	19 11 11 11 11 11 11 11 11 11 11 11 11 1
Scituate	1.State	<sup>Zip</sup> 0∂857	Harrsville	State T	05630 m
9. REGISTERED AGENT IT Igent Name	Y RHODE ISLAND	DO NOT ALTER- Char	iges require filing of Fo	rm 641 -R.I.GL7-6-13	the first of the second second
Thyllis A	Toor	• • • • • • • • • • • • • • • • • • •	85 Main 5	5+	· .
Po box 359	5		Paswas	$\mathcal{L}_{\mathcal{J}_{\mathcal{S}}}^{z_{i_{p}}}$	59
• • • • • • • • • • • • • • • • • • • •	** N	he President, Vice Pr	esident, Secretary, Assistan	t Secretary, Treasure	r, Receiver or Trustee
N.					•
		_	this report, including any	; I declare and affirm that accompanying schedule	s and statements,
	LED		and that all statements co	ontained herein are true a	nd correct.
File DateAUG	2 5 2004	10 17 54 OF S	7 JAM Wy (	Date	<u>v/34(0)</u>
BVM	4 10_		Printer type Name of Office	A Davr	
By: FOR SECRETARY OF STATE 1	ISE ONLY C AA	31713	Presi Len	+	
	DE ONLY (CALL	1124	Title of Officer	<del></del>	Form 631 Rev. 6/02

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FOR SECRETARY OF STATE USE ONLY

Office of the Secretary of			2	103.22.50
NON-PROFIT CORPO	RATION ANNUAL R	EPORT FOR THE	E YEAR 200	6
Filing Period: June 1 - June 30 ● (FORM MUST BE TYPED OR PRINTED )	Filing Fee: \$20.00			
1 Corporate ID No 2 Name	of Corporation	P. A. J.	1	The second se
3. State of Incorporation 4. Corpo	mane ASSOCiation	n ot North Wes	FEVOIR L.	LVC Zip
Rhole Island 75	Main 57		Pascoag	PX 02859
5. Foreign corporation: Enter principal offi	ce address	City	State	Zip
6. Brief Description of the character of the o	Mairs which are actually conducted in Rho	de Island	i Inggan saan ahaan kan kan kan kan kan kan kan kan kan	Constitution and Constitution of the Constitut
Sheltering and		homeless pe	42	
7. NAMES AND ADDRESSES OF T	HE OFFICERS ("X" BOX FOR ATTA	CHMENT) [ ] FILL IN SPACES ]	BEFORE USING ATTAC	<b>ÚMENTS</b>
Phyllia A Dove		Vice President Name Rance	CI	
65 North Share	1)~	17 Cove R	०१८ .	
Elentile Br		- Harristille		W830
Calada Nome		Treaturer Name		G036
Donna Meder	0 S	Dawn Fr.	22ell	
965 Greenville	tre	52 Steere Fo	irm Rd	
Greenville State	Zin -	Harrisville	State	02830
8 NAMES AND ADDRESSES OF T		the first contract the second contract to the	S BEFORE USING ATTA	şi, ili ili məyəyə əyərə ərə ərə
THE NUMBER OF DIRECTOR	S OF A DOMESTIC (RHODE ISLAND)			
Barbara Helm	0-	Davi3 Lev	nos	F 350
Street Address		Street Address		The second
PO BOX 561		PO BOX 3	<u>.</u> <b></b>	9-95-53 1 <b>7:</b> 2
Chepachet state	E 00014	Greenville	CE .	09878T
Judith Silver	,	Director Name		= 当
Street Address 7	_	Barban Bos Speel Address 52 Steere Fa	vasive	
Street Address Bungy State	Zip Zip	(17)	im isoca	Zip
Scituate R	T 02857	Harrisville	18±	09830
9. REGISTERED AGENT IN RHOD Agent Lame	E ISLAND DO NOT ALTER- Chang	pes require filing of For	n 641 -R.I.GL 7-6-13)	1-6-78
Phyllis A D	orc	85 Main	5 <del>+</del> ,	-
Address		R	Zip	
Po Bax 355	nga Shekkah ndaga Mililaga dan daga philipsa pipa a masa da kasa da nama a sa sakil sa ama da sa sa sa sa sa s	Pascoag	086	57
This report must be signed in ink	by either the President, Vice Pres	sident, Secretary, Assistant 1	Secretary, Treasurer,	Receiver or Trustee
		Under penalty of perjury, I this report, including any a		
	•	and that all statements cont		
File Date 110 9 5 20	10 ca	Mulli !!	D 6/	10/04
HOU 20 20	0	Singulary of Officer	Date	<del></del>
Check No. By	450	Pript or Type Name of Officer	Don	
Bv:	CM.			

To be filed annually during the month of June



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

### **NON-PROFIT CORPORATION**

Co	rporate ID Number <u>ND</u>	-26716	Annual Report for the year 1999				
1.	The name of the corpo	ration is The Hum	ane Association of Northwestern Rhode Island, Inc.				
2. 3.	•		ws of which it is incorporated is Rhode Island corporation in this state is 40 GROVE STREET PASCOAG, RI 02859				
<b>4</b> .	The character of the at In Point S	ffairs which it is action of Relieve	is state at that address is IVY R. TURNER  ually conducting in Rhode Island, briefly stated, is Revent CRUHY  S. Fferry to Awimal & Homme English  principal office in the state or other jurisdiction under the laws of which it is				
6.	incorporated is Corporate address in F	Rhode Island	O. BOX 355 PASCUAJ RI 02859				
7.	7. Names and addresses of its directors and officers: (In compliance with 7-6-23 of the R.I.G.L. 1956, as amended, the number of directors of a domestic (Rhode Island) corporation shall not be less than three (3).)						
	NAME	OFFICE	ADDRESS				
	yy Turner I Mancini oris Lemos Phyllis A. Do vol Charpentier noten A. Manci own Frizzell	<del></del> _	40 Grove street Pascoag RI 02859 35 Hemlock Rd Chepachot RI 02814 PO Box 336 Corpoville RI 02828 65 North Shore Drive Glandale RI 02826 518 Willy Worklead Drive Chepachot RI 02814 35 Hemlock Rd Chepachot RI 02814 52 Steene Farm RD Charrisille RI 02830				
File	ted:  * 2 6 7 1 6  FOR SECRETARY OF STATE Date:  Ck No.:  A 710	LSE ONLY	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.  The Number Association of Morthwestern Ribe Islands By Live Islands Exact Name of Corporation  By Reasoner (Report must be signed by an officer)				
Ву:	<u> </u>		Form No. NP-13 Revised 5/98				



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

### **NON-PROFIT CORPORATION**

	•	1011 1 1101 11					
Co	rporate ID Number ND-26716	<del></del>	Annual Report for the year 1998				
1.	The name of the corporation isT	he Humane Assoc	ciation of Northwestern Rhode Island, Inc.				
2.	· · · · · · · · · · · · · · · · · · ·		th it is incorporated is RHODE ISLAND				
3.	The address of the registered offi 02859	ce of the corporati	on in this state is 1555 WALLUM LAKE ROAD PASCOAG, RI				
	and the name of its registered ag	ent in this state at	that address is GERALDINE M. BOULEY				
4.							
	(Rivelty To Avima)	3- Relieu	e Suffering to Animal & Humane Elwation				
5	- '	ss of its principal o	office in the state or other jurisdiction under the laws of which it is				
6.	incorporated is Corporate address in Rhode Islan	nd 7.0. Br	x 355 PASCOAS RI 02859				
7.	Names and addresses of its directors and officers: (In compliance with 7-6-23 of the R.I.G.L. 1956, as amended, the number of directors of a domestic (Rhode Island) corporation shall not be less than three (3).)						
	NAME OFF	CE	ADDRESS				
と対して下記	RISTEN MANG DI Secr	etor $\frac{\mathbf{P.c.}}{\mathbf{V}}$	Steere farm RD HARRISVILLE RIOSSO  Box 336 Greenville RT CARAC  Stoneham St. Craniston RI CARSO  GROVE St. PASCOAR RT CARSO  North Shore Drive Gleniale RI CARSO  Box 970 Chepachet RI OARD  Steere farm RD HARRISVILLE RICARSC				
	FOR SECRETARY OF STATE USE ONLY	report, all state  The	benalty of perjury, I declare and affirm that I have examined this including any accompanying schedules and statements, and that ements contained herein are true and correct.  HUMANE ASSOCATION OF ADRHAMESTERN RT  Exact Name of Corporation				
Cho	cck No.: <u>430</u>	Title _	(Report must be signed by an officer)				
Ву:	CONT		Form No. NP-13 Revised 5/98				

To be filed annually during the month of June

#### State of Rhode Island and Providence Plantations

Corporation Division 100 North Main Street Providence, RI 02903

#### **NON-PROFIT CORPORATION**

Corporate ID Number	0026716		Annual Rep	ort for the year	1997	••••	
FIRST: The name	of the corporation is	The Humane A	ssociation	of Northwe	estern (	Rhode	Isla
SECOND: It is inc	corporated under the	aws of Rh	de Isla	din.			
THIRD: The chara	acter of the affairs wh	ich it is actually con	ducting in Rhode	Island, briefly st	ated, is	<i>.</i>	•
Revent CRUE AND to Extend FOURTH: If a fore	ty to Avid Humaue Co	mals, Relie Jucation Jucation Jucation	alsSuffe	RING	owls	ws of	İs
which it is incorporated is .	•••••		••••••••••	<u></u>	• • • • • • • • • • • • • • • • • • • •	· · · · · · · · · · · · · · · · · · ·	
FIFTH: Corporate	address in Rhode Isl	and $P0$ $P$		PASCOA.c	RI	02859	<del>)</del> .
THIS REPORT	WILL NOT BE AC	CEPTED UNLESS	THREE (3) DIF		E LISTED.		
BARBARA FONTA	(A).CDirector	44 GROVE	Street	Pascoa.c	RT 09	1859	
SARBARA BARAGI	ನ್ನDirector	sa steep					
Doris Lemos	Director	Pa Box 3	36 GREEN	ville RI	- - 028 <i>6</i>	38	
Ivy Turner		40 Grove	Street	Pascoar	028	59	
Phyllis DORR		65 North	Shoge D	RIVE GIEN	Male	RIO	ગ્રેશ્ચ ૯
				2000 () - 2000	و و و محمد و الله واللهام الم		
<i>1</i> ' '		PO BOX 9	70 Chepa	chet RI	02814	4	
Kristen Marci DAWN FRIZZEI	Secretary	PO BOX 9 52 Steered	70 Chepa ARM BD (	chet RI NORRISVIL	02814 le RI	_098 <del>-</del>	}o
KRISTEN MANCE DAWN FRIZZEI (If additional space is need	Secretary	P.O. Box 9 52 Steere + Humane A (Name of Coffporation)	70 Chepa ARM BD ( Sociation	chet RI NORRISVIL	02814 le RI	_098 <del>-</del>	}o
KRISTEN MANCE DAWN FRIZZEI (If additional space is need) Dated: 6/17	Secretary Treasurer ad, attach rider)  ED 19 .9.7.	P.O. Box 9 52 Steere + Humane A (Name of Coffporation)	70 Chepa ARM BD (	chet RI NORRISVIL	02814 le RI	_098 <del>-</del>	30
KRISTER MARKI DAWN FRIZZEI (If additional space is need Dated: 6/17	Secretary Treasurer ad, attach rider)  ED 19 .9.7.	P.O. Box 9 52 Steered Humane As (Name of Corporation) By Haws Title TRE	70 Chepa ARM BD ( Sociation	chet RI NARRISVII. Of Lbathu	O2814 le RI Estenn	1 - 038 - RII	

If the corporation has changed its registered office and/or its registered agent, Form N-14 must be filed.

Please contact the Corporation Division, 277-3040, for further information.

ISl

#### State of Rhode Island and Providence Plantations

Corporation Division 100 North Main Street Providence, RI 02903

#### **NON-PROFIT CORPORATION**

Corporate ID Number	0026716	. Annual Report for the year	1996
FIRST: The name	of the corporation is	The Humane Association of Northwes	tern Rhode
SECOND: It is inc	orporated under the	Rhode Island	
To Prevent cr	uelty to anim	nich it is actually conducting in Rhode Island, briefly stated hals, relieve suffering among animals	s and
FOURTH: If a fore	ign corporation, the	address of its principal office in the state or country under	the laws of
which it is incorporated is	••••••••••		•••••
FIFTH: Corporate	address in Rhode Isl	land P.O. Box 355 Pascoag R.L. 028	5.9
		rectors and officers: (In compliance with 7-6-23 of the R.I of a corporation shall not be less than three (3).)	.G.L. 1956,
THIS REPORT	MILL NOT BE AC	CEPTED UNLESS THREE (3) DIRECTORS ARE LI	STED.
NAME	OFFICE	ADDRESS	
Barbara Boragine	Director	52 Steerefarm rd Harrisville RI 02	330
Doris Lemos	Director	PO. Box 336 Greenville RI 02828	
Ethel Burrows	Director	16 Stoneham Street Cranston R.I.	02920
LvyTurner	President	40 Grove Street Pascoag RI 02859	••••••••••••
Lola.Nani	Vice-President	6GreenbriarDriveGreenvilleRI	0.28.28
Kristen Manoini	Secretary	P.OBox970.ChepachetRI02814	•••••••
DuwnFrizzell (If additional space is neede		5.2Steerefarm.rdharrisvilleRI	
Dated: June 6th	1996	(Name of Corporation  By	rn RI
By C/m & 21/9	46	Title Treasurer (Report must be signed by an officer)	••••••
			er

If the corporation has changed its registered office and/or its registered agent, Form N-14 must be filed.

Please contact the Corporation Division, 277-3040, for further information.

#### State of Rhode Island and Providence Plantations

Corporation Division 100 North Main Street Providence, RI 02903

#### **NON-PROFIT CORPORATION**

Corporate ID Number 0025715	Annual Report for the year1995
FIRST. The name of the corporation is	The Humane Association of Northwestern Phode Island, Inc.
	aws of RHODE IS/AND
THIRD: The character of the affairs wh	ich it is actually conducting in Rhode Island, briefly stated, is 10
	teol humane Education
FOURTH: If a foreign corporation, the	address of its principal office in the state or country under the laws of
which it is incorporated is	<u></u>
FIFTH: Corporate address in Rhode Isl	and BO Box 355 Pascons Rt 02859
	rectors and officers: (In compliance with 7-6-23 of the R.I.G.L. 1956, of a corporation shall not be less than three (3).)
THIS REPORT WILL NOT BE AC	CEPTED UNLESS THREE (3) DIRECTORS ARE LISTED.
NAME OFFICE	ADDRESS
BARBARA BORASINE Director	52 Steenefarm RD Harris 1/1 RT 02830
Dakis Lemos Director	P.D. Box 336 Gerenville Bt 02828
GRAZIELLA GIAMPAOLI DIRECTOR	38 Scenery Lane Johnston Rt 02919
IV.y. TURNER President	40 Grove Street Pascons RI 02859
Lala Navi Vice-President	6 GREENBRIAR DRIVE GREEN'S ME RT 62828
CARNI CARPRUTIEN Secretary	SW Willie Wood Head Boad Closten BI DOSSE
IPWW FAIZZC/(Treasurer (If additional space is needed, attach rider)	52 Steene farm RD HARRISUILLE BE 08830
Dated:	The Humane Assocation of Northwestern RT (Name of Corporation)
PAID	By Wan Migelli
JUN 2 6 1995 BECRETARY OF STATE	Title TREASURER (Report must be signed by an officer)
If the corporation has changed its regi	stered office and/or its registered agent, Form N-14 must be filed.
Form No N-13	poration Division, 277-3040, for further information.

Ch# 1478 mnc

To be filed annually during the month of June

## State of Rhode Island and Providence Plantations

### NON-PROFIT CORPORATION

Corporate ID Number	0026716		Annual Report for the	year	1994
First: The name	of the corporation is	The Humans	: Association of	Northweste	ern Rhode Isla
		d, Inc.		·····	
SECOND: It is inco	orporated under the la	ws of	RhoDe Is	laul)	
THIRD: The chara	cter of the affairs whi	ch it is actually	conducting in Rhode	Island, briefly sta	ted, is
TO PREVENT C	Ruelty To A	wimals Educati	Believe 505	Pering Ar	nong Awmals
			rincipal office in the sta		
which it is incorporated	is				
Fifth: Corporate	address in Rhode Isla	nd PO	Box 355	PASCOAS	RT 038 <b>5</b> 9
SIXTH: Names and	d addresses of its direc	ctors and office	ers:		- <b>ED</b> 0 1994
	(Addresses	must include stre	et and number, if any)	By m	ne .
NAME	OFFICE		ADDRE		
GRAZIElla GIAM	Paoli Director	38 Scen	very Lave Jol	wston RI	O2913
BARBARA BORASI	Ne Director	sa stee	Re farm RA	HARRISVILL	RI 02830
Doris Lemos	Director	Po. Bo	ox 336 GREE	Nulle R.	T 02828
IVY TURNER	President	40 Gr	Rove Street	PASCOAS A	?I 028.59
LOLA NANI	Vice Preside	nt 6 GR	EN BRIAR DR	ive Green	VII/e RI 028%
CAROL CHARDE	Wither Secretary	518. Wil	the Woodhead	R.D. Gict	er RT 0225
DAWN FRIZZE (If additional space is neede	//Treasurer	<i>5</i> 2 570	ere farm R	D HARRISM	//e RI 02830
Dated: June 3	19 94	(Name of Corpo	omaje Association	ion of Nor	thwestern Rt.
		Byh	ww Frizzel	L	
		TitleT.B	Beasu Rek		·······

(Report must be signed by an officer)

To be filed annually during the month of June

## State of Rhode Island and Providence Plantations NON-PROFIT CORPORATION

Corporate ID Number 9925/1	5	Annu	al Report for	the year	1.95	93	
FIRST: The name of the co	rporation is		Humane As	<b></b> <del>.</del>	ວກ of	Northweste	rn E
SECOND: It is incorporated	under the laws	s ofRhode Is	sland	••••••			
THIRD: The character of the	ne affairs which	it is actually condu	cting in Rhoo	de Island, b	riefly stat	ted, is	
To prevent crue to extend human			.esuf.fer.	ingamor	ıgani	malsand	
FOURTH: If a foreign corp	oration, the ado	dress of its principa	l office in the	state or co	untry und	der the laws of	i
which it is incorporated is	***************************************	••••••	•••••	•••••	• • • • • • • • • • • • • • • • • • • •	•••••	1
FIFTH: Corporate address	in Rhode Island	dPOBox	355.,Pas	coag.,R1	02.8.	59	
SIXTH: Names and address	es of its directo	ore and officers:	······································	• • • • • • • • • • • • • • • • • • • •		1.54	
, ivalies and address	cs of its directo	ors and orners.	•			410	
	(Addresses mu	st include street and r	number, if any)		JUN 3	3 0 1993	
NAME	OFFICE		ADD	RESS	SEC'Y (	OF STATE	
GraziellaGiampaoli	Director	.3.8Scenery1	lane,Joh	nstonI	RI0.2.	919	
BarbaraBorzgine	Director	-52SteereFa	rm…Roady	-Harricy	/ille,	RI02830-	
Doris Lemos	Director	.P	36. Green	v.ille	3102	828	
Ivy Turner	President	40 Grove St	reet. Pas	coag. R	028	59	
Lola Nani	Vice President	6Greenbria	Drive,	Greenvil	1.1e.,R	I02828	
.Kachy Magiera	Secretary	46 Kulas St	reet,Wes	t…Warwic	⊵k.,…R·I·	02893	
GeraldineBouley(If additional space is needed, attach a		.1.555Wallum	.LakeRoa	d.,Pasco	≽ag.,R	·I0.2859	
Dated: June 29.	19 .9.3	The Humane. (Name of Corporation)	.Associat.	ionof1	Northw <sub>i</sub>	esternRI.	
		By General	u Bo	uley	******************		
		TitleTreasu					

(Report must be signed by an officer)

## State of Rhode Island and Providence Plantations NON-PROFIT CORPORATION



Corporate ID Number 9925715	Annual Report for the year
FIRST: The name of the corporation	is The Humane Association of Northwestern Rhode Island
SECOND: It is incorporated under the	e laws ofRh.odeIsland
THIRD: The character of the affairs	which it is actually conducting in Rhode Island, briefly stated, is
To prevent cruelty to an to extend humane education	imals, relieve suffering among animals and
FOURTH: If a foreign corporation, t	he address of its principal office in the state or country under the laws of
which it is incorporated is	
FIFTH: Corporate address in Rhode	Island P. O. Box 355, Pascoag, RI Q2859
SIXTH: Names and addresses of its of	directors and officers:
(4.44	7217
NAME OFFICE	ses must include street and number, if any)  ADDRESS
Mildred Legg Director	330 Eagle Peak Rd, Pascoag, RI 02859
Dor.isLamos	PGBox336;Greenville;Rf02828
Graziella Gianpaoli Director	38 Scenery Lane, Johnston, RI 02919
Lyy Turner President	$\gamma \sigma_{\gamma}$
Stephanie Sloman Vice Pres	sident 387 Courthouse Lane, Pascoag, RI 02859
Kathy Magiera Secretary	46 Kulas Street, West Warwick, RI 02893
Geraldine M. Bouley Treasure (If additional space is needed, attach rider)	
Dated: June 24, 19 92	The Humane Association of Northwestern R. I. (Name of Corporation)
	By Gereldese M. Bouley
	Title Treasurer

(Report must be signed by an officer)

To be filed annually during the month of June

## State of Rhode Island and Providence Plantations NON-PROFIT CORPORATION

Corporate ID Number 0026716	Annual Report for the year
Corporate 1D Number	The Humane Association of Northwestern
FIRST: The name of the corporation is	
RHODE ISLAND	
SECOND: It is incorporated under the laws	of RHODE ISLAND
THIRD: The character of the affairs which	it is actually conducting in Rhode Island, briefly stated, is
X To prevent cruelty to ani and to extend humane educat	mals, relieve suffering among animals ion.
FOURTH: If a foreign corporation, the add	lress of its principal office in the state or country under the laws of
which it is incorporated is	
FIFTH: Corporate address in Rhode Island	P.O. Box 355, Pascoag, R.I. 02859
SIXTH: Names and addresses of its director	rs and officers:
(Addresses mu	st include street and number, if any)
NAME OFFICE	ADDRESS
Mildred Legg Director	492 Eagle Peak rd Pascoag, R.I. 02850
Doris Lemos Director	P.O. Box 336, Greenville, R.I. 02828
Dora Flynn Director	RFD#1,Box415,Pulaske.Rd,Chepachet,R.J.
Ivy Turner President	40 Grove St., Pascoag, R.I. 02859
Barbara Cole Vice President	Box 99, Saw Mill Rd. Harmony, R.I. 02829
Kathy Magiera Secretary	46 Kulas Rd. West Warwick R.I. 02893
Richard Brown Treasurer (If additional space is needed, attach rider)	P.O. Box 448, Chepachet, R.I. 02814
Dated: July 3	The Humane Association of Northwestern R. I. (Name of Corporation)
PAID	By Richard K Brown
PAID  IIIN 3 0 1991  SEC'Y OF ST	Title
SEC'Y OF ST.	(Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent,
Form N-14 must be filed. Please contact Corporation Division for information, 277-3040

## State of Rhode Island and Providence Plantations NON-PROFIT CORPORATION



Corporate ID Number 226	716	Annual Report for the year1.942
FIRST: The name of the Rhode Island, In		The Humane Association of Northwestern
SECOND: It is incorpora	ated under the law	vs of Rhode Island
THIRD: The character of	of the affairs which	h it is actually conducting in Rhode Island, briefly stated, is
Topeventcruetl	ytoanimals	s, releive suffering among animals
		dress of its principal office in the state or country under the laws of
FiFTH: Corporate addre 02859	ess in Rhode Island	d P. O. Box 355, Pascoag, R.I.
SIXTH: Names and addi		ors and officers: / Chairmanship  SEC. Y. OF STATE  ADDRESS
NAME		S7475
	OFFICE	
Doris Lemos	Director 492	Eagle Peak Rd Pascoag, R.I. 02859
		Box 336, Greenville, R.I. 02828
Dora Flynn	Director R.F.	D#1Box415PulaskeRdChepachet.,RI
IVY Turner	President 18	Grove St. Pascoag, R.I. 02859
Barbara Cole	Vice President	Box99,Saw.Mill.RdHarmony, R.I02829
Kathy Magiera	Secretary 46	Kulas Rd. West Warwick R.I. 02893
Richard Brown (If additional space is needed, attac	Treasurer P.O	BOX. \$\$\$448,Chepachet,R.I02814
Dated: January 28		The Humane Association of Northwestern R. I. Inc. (Name of Corporation)  By Scharl X Brown
		Title Treasurer

(Report must be signed by an officer)

## State of Rhode Island and Providence Plantations

### NON-PROFIT CORPORATION

Corporate ID Number 0026716		A	nnual Repo	rt for the year	1999 \
FIRST: The name of the co	•	isThe	Humane	Association	of Northwestern Rh
Rhode Island Inc	•	••••••	••••••	••••••	
SECOND: It is incorporated	d under th	e laws of Rhode	Island		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
THIRD: The character of t To prevent cruelty		•	•	· ·	•
extend humane educa FOURTH: If a foreign corp which it is incorporated is	oration, th				-
FIFTH: Corporate address	in Rhode	Island P.O. Bo	x 355. 1	Pascoar, R. ]	02859
C		1		ع الم	ຽ
SIXTH: Names and addres	ses of its a	lirectors and officers:	- Chairs	nenship''∴;	<i>1989</i>
	(Address	ses must include street a	nd number, i	fany)	,
NAME	OFFICE			ADDRESS	
Mildred Legg	Director	492 Eagle Pea	k Rd, Pa	scoag, R. I.	02859
Doris Lemos	Director	P.O.Box 336,	Greenvil	lle. R. I. 02	828
Dora Flynn	Director	R.F.D.#1Box 4	15 Pulas	ki Rd, Chepac	het.R.I
Ivy Turner	President	18 Grove St.Pa	ascoag,	R. I. 02859	••••••••
Barbara Cole	Vice Pres	ident Box 99, Saw	Mill Rd	l.Harmony,R.	I. 02829
Jo Ann Bishandeski	Secretary	23 Spring St	. Pascoas	r. R. I. 0285	19
Rosalie Gagnon (If additional space is needed, attach		141Centennia	al…S.tPa	scoar,R.I	.02859
Dated: June 29	<b>19</b> .8.9	The Humane		tion of Nort	hwestern •
		By 7 ax	alie	Jugno	W.
		Title Treasu	rer		

(Report must be signed by an officer)

## State of Rhode Island and Providence Plantations

D.P.

NON-PROFIT CORPORATION

Corporate ID Number 26716	Annual Report for the year 1988
	s The Humane Association of Northwestern
SECOND: It is incorporated under the	laws of Rhode Island
THIRD: The character of the affairs w	which it is actually conducting in Rhode Island, briefly stated, is
	mals, releive suffering among animals and to
extend humane education	
FOURTH: If a foreign corporation, the	e address of its principal office in the state or country under the laws of
which it is incorporated is	
FIFTH: Corporate address in Rhode I	sland P.O.Box 355, Pascoag, R. I. 02859
	rectors and officers: / Chairmenship
NAME OFFICE	ADDRESS
Mildred Legg Director	492 Eagle Peak Rd. Pascoag, R.I. 02859
Doris Lemos Director	P.O.Box 336. Greenville, R. I. 02828
Dora Flynn Director	
Ivy Turner President	R.F.D.#1, Box 415 Pulaske Rd, Chepachet, R.I.  18 Grove St., Pascoag, R. I. 02859
- I I Gident	
	dent Box 99. Saw Mill Rd. Harmony, R. I. 02829
Jo Ann Bishandeski Secretary	<u>-</u> ,
Rosalie Gagnon Treasurer (If additional space is needed, attach rider)	27 Centennial St., Pascoag, R. I. 02859
Dated: Oct, 5 19 88  OCT 17 1988  SEC'Y OF STATE	The Humane Association of Northwestern (Name of Coupon) R.I., Inc.  By Walie Association
SEC: 17 1988	Title Treasurer
OFSTA	
TATE	(Report must be signed by an officer)

(Report must be signed by an officer)

## State of Rhode Island and Providence Plantations NON-PROFIT CORPORATION

Corporate ID Number 25/1	6	Annual Report for the year 1987
FIRST: The name of th	e corporation i	The Humane Association of Northwest
ern Rhode Island, I	-	
SECOND: It is incorpor	ated under the	laws of
THIRD: The character	of the affairs w	hich it is actually conducting in Rhode Island, briefly stated, is
To prevent cruelt	y to anima	ls, releive suffering among animals and to
extend humane educ		
		e address of its principal office in the state or country under the laws of
which it is incorporated is		
FIETH: Corporate addr	ress in Phode I	sland P. O. Box 355, Pascoag, R. I. 02859
		e Gagnon 27 Centennial ot. Pascoag, R. I. 02859
	(Addresses	s must include street, number if any, and zip code)
NAME M1ldred Legg	office Director	ADDRESS 492 Eagle Peak Rd. Pascoag, R. I.
Doris Lemos	Director	P.O.Box 336, Greenville, R. I. 02828
Dora Flynn		R.F.D.#1, Box 415 Pulaske Rd. Chepachet, R.I.
Ivy Turner	President	18 Grove St., Pascoag, R. I. 02859
Barbara Cole	Vice Presid	ent Box 99, Saw Mill Rd. Harmony R.I. 02829
Joan Cloward	Secretary	137 Reservoir Rd. Pascoag, R. I. 02859
Rosalie Gagnon	Treasurer	27 Centennial St. Pascoag, R. I. 02859
If additional space is needed, att		
Dated: June 15	1987	The Humane Association of Northwestern R.I. Inc
	1. July 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	By asalee & Lagnon
.177	N 18 1987	Title Treasurer



# THE HUMANE ASSOCIATION OF NORTHWESTERN RHODE ISLAND, INC. P.O. BOX 355 PASCOAG, RHODE ISLAND 02859



Lefat 27, 1988
Dear Since reviewing my association
in the reviewing my association
-books, I could not the cate our
non-profit corp. report for the
exac June 1988.
1. Sillaund our prevence
Reports literat the Exit one seems
the he mane 15 1987 . No you
Alan it on file! we wated the
dedat elle bac. O'L never receive
all down to tile. Thease let
me know what tropped
Thank your,
Rapalie P. Hagnon

20SALIE R. GAGNON 27 CENTENNIAL ST PASCIAGERI 02859

ROSALIE R. GAGNON 27 CENTENNIAL ST PASCOAG,RI 02859

To be filed annually during the month of June

## State of Rhode Island and Providence Plantations NON-PROFIT CORPORATION

Corporate ID Number 26716	Annual Report for the year 1986
ern Rhode Island, Inc.	The Humane Association of Northwest
SECOND: It is incorporated under t	he laws of Rhode Island
THIRD: The character of the affairs	which it is actually conducting in Rhode Island, briefly stated, is
To prevent cruelty to animextend humane education	mals, releive suffering among animals and to
FOURTH: If a foreign corporation,	the address of its principal office in the state or country under the laws of
which it is incorporated is	
FIFTH: Corporate address in Rhod	e Island P.O. Box 355, Pascoag, R. I. 02859
•	Gagnon 27 Centennial St. " " "
SIXTH: Names and addresses of its	directors and officers:
(Addre	sses must include street, number if any, and zip code)
NAME OFFIC	E ADDRESS
Mildred Legg Directo	492 Eagle Peak Rd. Pascoag, R. I. 02859
Doris Lemos Directo	P.O.Box.336, Greenville, R. I. 02828
Dora Flynn Directo	R.R.D.#1 Box 415 Pulaski Rd. Chepachet R. I. 0281
Ivy Turner Presiden	t 18 Grove St., Pascoag, R. I. 02859
Barbara Cole Vice Pro	sident Box 99, Saw Mill Rd. Harmony, R. I. 02829
Joan Cloward Secretar	y 137 Reservoir Rd. Pascoag, R.I. 02859
Rosalie Gagnon Treasur (If additional space is needed, attach rider)	er 27 Centennial St., Pascoag, R. I. 02859
Dated: June 4 19 86	The Humane Association of Northwestern R. I. Inc. (Name of Comparation)
PAID 19.86  PAID 16 1986	By Paralie L. Lagron
IIIL TATELLE	Title Treasurer
SECY OF STATAUG	12ENTD (Report must be signed by an officer)

If the corporation has changed its registered office and/or its registered agent,
Form N-14 must be filed. Please contact Corporation Division for information, 277-3040

Mail with for the Corporations Division 270 Westminster Mail Providence PL 02003

## State of Rhode Island and Providence Plantations

NON-PROFIT	CORPORATION
11011-110111	COM ONATION

2 Corporate ID Number	6716		Annual Report for the year	
Corporate 12 Humber	•••••••••••••••••••••••••••••••••••••••		Association of Northwest	
			Rhode Island	
THIRD: The addre	ss of its registered of	office in Rhode Isl	and is 27 Centennial St. P.O.Box 35	i <i>5</i> .
Pascoag, R. I	. 02859	••••••	and the name of	its
registered agent at such a	ddress in Rhode Is	land isRosali	e R. Gagnon, Treasurer	••••
			incipal office in the state or country under the laws	
FIFTH: The charac	ter of the affairs w	hich it is actually o	conducting in Rhode Island, briefly stated, is	••••
To prevent cr to extend hum SIXTH: Names and	ane education	a	suffering among animals and	••••
	(Addresse	es must include street	t and number, if any)	
NAME	OFFICE		ADDRESS	
Mildred Legg	Director	492EagleP	eak Rd. Pascoag, R. I. 02859	···••
oris Lewos	Director	P.Q.Box336	, Greenville R. I. 02828	
ora Flynn	Director	R.F.D.#1Bo	x.415 Pulaski Rd. Chepachet R.I.O	281/
vy Turner	President	18 Grove St	., Pascoag, R. I. 02859	••••
arbara Cole	Vice Presid	dent Box 99,	Saw Mill Rd. Harmony R. I. 02829	
oan Cloward	Secretary	137 Rese	rvoir Rd., Pascoag, R. I. 02859	
osalie Gagnon(If additional space is needed		2.7. Senten	nial St., Pascoag, R. I. 02859	·••
Dated: June 11	19 .85	(Name of Corpora	Association of Northwestern R. I.	
	LR	TitleTre		···•

### State of Chode Island and Providence Plantations

## BIENNIAL REPORT OF NON-BUSINESS CORPORATION.

(FEE FOR FILING, \$10.00)

To be filed in the month of FEBRUARY, of each even year, in the office of the SECRETARY OF STATE, PROVIDENCE, by corporations incorporated under the laws of the State of Rhode Island; in accordance with the provisions of § 7-6-14 of CHAPTER 7-6 of the GENERAL LAWS OF RHODE ISLAND 1956 (Non-Business Corporations). (FEE FOR FILING \$10.00; Maximum penalty for failure to file, \$50, and possible forfeiture of charter.)

cnarter.)			
The HUMA	NE_ASSOCIATION_OF_1	NORTHWESTERN B.I.	INC.
	eated under the laws of tags, as required by § 7-6-14		
(1.) Name of	Corporation THE HUM.	ANE ASSOCIATION OF	NORTHWESTERN R.I. INC.
(2.) Location	of Principal Office in Rh	ode Island BOX 355, F	PASCOAG., R.I. 02859 Street, City or Town)
(3.) Names areach:—	nd addresses of all Officer	s, and Date of Expiration	on of Term of Office of
OFFICE.	NAME.	ADDRESS.	TERM EXPIRES.
PRESIDENT, IVY I	URNER, 18 GROVE ST.	, PASCOAG, R.I. 02	859 6/1/84
VICE PRESIDENT,	BARBARA COLE, BOX 9	9, SAW MILL R. HARMO	NY R.I. 6/1/84
SECRETARY, JOAN	CLOWARD, 137 RESERV	DIR RD., PASCOAG, R	.1.02859 6/1/84
TREASURER, ROSAL	LIE GAGNON,27 CENTE	NNIAL ST., PASCOAG,	B.I.02859 6/1/84
		,	
(4.) Date Ap	pointed for Next Annua	l Meeting of the Corpor	ationMAY 21 1984
. ,			egoing to be correct:—
∵G 1 0 <b>1984</b>	PAID	asalie L. Lag (Name) (Dength	NON Treasurer
LAM	2.5.8. 	V	

BIENNIAL REPORT

FILED IN THE OFFICE OF THE SECRETARY OF STATE

### State of Rhode Island and Providence Plantations

## BIENNIAL REPORT OF NON-BUSINESS CORPORATION.

### (FEE FOR FILING, \$10.00)

To be filed in the month of June, of each even year, in the office of the SECRETARY OF STATE, PROVIDENCE, by corporations incorporated under the laws of the State of Rhode Island; in accordance with the provisions of § 7-6-14 of CHAPTER 7-6 of the GENERAL LAWS OF RHODE ISLAND 1956 (Non-Business Corporations). (FEE FOR FILING \$10.00; Maximum penalty for failure to file, \$50, and possible forfeiture of charter.)

	SCOAG.R.I.028( mt, City or Town)	Island BOX 355, PAS		
ice of		(No. Stre	Principal Office in R	(2.) Location
	of Term of Offic	d Date of Expiration	addresses of all Office	(3.) Names an each:—
PIRES.	TERM EXP	ADDRESS.	NAME.	OFFICE.
<b>/84</b>	6/1/8	OAG, R.I. 02859	NER, 18 GROVE ST.	ESIDENT, IVY TU
84	R.I. 6/1/8		RBARA COLE, BOX99	CE PRESIDENT, B
84	02859 6/1/8	D. PASCOAG,R.I.O	OWARD,137 RESERV	CRETARY, JOAN C
84	.1,02859 6/1/8	ST., PASCOAG, B.	GAGNON, 27 CENTE	EASURER, BOSALI
1	R.I. 6/1/9	MILL RD.HARMONY 02829 RD. PASCOAG,R.I.O	RBARA COLE, BOX99 OWABD, 137 RESERV	ICE PRESIDENT, E ECHETARY, JOAN C

BIENNIAL REPORT

FILED IN THE OFFICE OF THE SECRETARY OF STATE

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## State of Chode Island and Providence Plantations

## BIENNIAL REPORT OF NON-BUSINESS CORPORATION.

#### (FEE FOR FILING, \$10.00)

To be filed in the month of June, of each even year, in the office of the SECRETARY OF STATE, PROVIDENCE, by corporations incorporated under the laws of the State of Rhode Island; in accordance with the provisions of § 7-6-14 of CHAPTER 7-6 of the GENERAL LAWS OF RHODE ISLAND 1956 (NON-BUSINESS CORPORATIONS). (FEE FOR FILING \$10.00; Maximum penalty for failure to file, \$50, and possible forfeiture of charter.)

1 ne /13	WARE ASSOCIATION OF	NUBTHWESTERNR. I	LNC	
		the State of Rhode Islan 4 of Chapter 7-6 of the G		
(1.) Name o	f Corporation THE HUM	ANE ASSOCIATION OF 1	NORTHWESTERNINC.	
(2.) Location	Location of Principal Office in Rhode Island BOX 355, PASCOAG, R.I. 02859 (No. Street, City or Town)			
(3.) Names a each:	and addresses of all Office	rs, and Date of Expiration	on of Term of Office of	
OFFICE.	NAME.	ADDRESS.	TERM EXPIRES.	
PRESIDENT.	IVY TURNER, 18 GROV	E.ST., PASCOAG, R.	6/1/83	
VICE PRESID	ENT, VIOLA McGUIRE	SNAKE HILL RD., GI	OCESTER, R.I. 6/1/83	
SECRETARY,	JOAN M. CLOWARD, RE	SERVOIR RD. PASCOAC	R.I.02859(-6/1/83	
		? CENTENNIAL ST., F		
		5 %		
		82		
Form N.B. 31		200 200	A	

BIENNIAL REPORT

FILED IN THE OFFICE OF THE SECRETARY OF STATE

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19

### State of Chode Island and Providence Plantations

## BIENNIAL REPORT OF NON-BUSINESS CORPORATION.

(FEE FOR FILING, \$10.00)

To be filed in the month of FEBRUARY, of each <u>even</u> year, in the office of the SECRETARY OF STATE, PROVIDENCE, by corporations incorporated under the laws of the State of Rhode Island; in accordance with the provisions of § 7-6-14 of CHAPTER 7-6 of the GENERAL LAWS OF RHODE ISLAND 1956 (NON-BUSINESS COBPORATIONS). (FEB FOR FILING \$10.00; Maximum penalty for failure to file, \$50, and possible forfeiture of charter.)

,	The HUMANE ASSOCIATION	OF NORTHWESTERN R.I.	INC			
follow	oration created under the laws ing report, as required by § 7-6 led:—					
(1.)	Name of Corporation THE H	UMAME_ASSOCIATION_OP	NORTHWESTERN R.I. J	INC.		
(2.)	2.) Location of Principal Office in Rhode Island BOX 355 PASCOAG, R. I. 02859 (No. Street, City or Town)					
(3.) each:-	Names and addresses of all Off	icers, and Date of Expiration	n of Term of Office of			
OFFIC	E. NAME.	ADDRESS.	TERM EXPIRES.			
PRESID	ENT, MATTHEW V.SHEE	HAN III,16 ABBEY LANE	,FOSTER,R.I02825	6/1/80		
VICEP.	RESIDENT ELIZABETH J. S	HEEHAN 16 ABBEY LANE	,FOSTER,R.I02825	6/1/80		
SECRET	RYtemp) ELIZABETH J. S	HEEHAN 16 ABBEY LANE,	FOSTER, R. I. 02825	6/1/80		
TREASU	RER ROSALIE R. GAGN	ON, CENTENNIAL ST. PAS	COAG,R.I.02859	6/1/80		
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(4.)	Date Appointed for Next Annu	al Meeting of the Gorporati	on MAY 12 19.80			

I hereby certiff the foregoing to be correct

BIENNIAL REPORT

FILED IN THE OFFICE OF THE SECRETARY OF STATE