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: 2019

1. Corporate ID No. 000311293

2. Name of Corporation CENTREVILLE BANK CHARITABLE FOUNDATION

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 6

813211

4. Corporate Address in Rhode Island

No. and Street: 1218 MAIN STREET
City or Town: WEST WARWICK State: RI Zip: 02893 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

FOR CHARITABLE PURPOSES, INCLUDING THE MAKING OF DISTRIBUTIONS TO ORGANIZATIONS THAT QUALIFY AS EXEMPT ORGANIZATIONS UNDER SEC 501(C)(3) OF THE INTERNAL REVENUE CODE AND FUTURE TAX CODE.

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Incorporator is no longer applicable; please delete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

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
SECRETARY	LISA LALIBERTE	784 NOOSENECK HILL ROAD WEST GREENWICH, RI 02817 USA
DIRECTOR	JILLIAN J. DESHIRO	11 TIMBERLINE DRIVE MANSFIELD, MA 02048 USA
DIRECTOR	HAROLD M. HORVAT	37 GLEN AVENUE CRANSTON, RI 02905 USA
DIRECTOR	MARK NOBLE	1158 SOUTH ROAD WAKEFIELD, RI 02879 USA
DIRECTOR	KATHLEEN BARTELS	161 EXCHANGE STREET PAWTUCKET, RI 02860 USA
DIRECTOR	ANDREA M. HOPKINS	3 PINE GROVE LANE WEST GREENWICH, RI 02817 USA
DIRECTOR	ALFRED MENDES	29 EVERGREEN DRIVE SEEKONK, MA 02771 USA
DIRECTOR	MARY K. HALPIN	100 EXCHANGE STREET PROVIDENCE, RI 02903 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

THOMAS J. LAMB, JR 1218 MAIN STREET WEST WARWICK , RI 02893

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

Signed this 13 Day of May, 2019 at 1:29:35 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 LISA LALIBERTE
Signature of Authorized Person

Form No. 631
Revised 09/07

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