



**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.** 000163012

**2. Name of Corporation** Friends of the Bristol Animal Shelter

**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   
813990

**4. Corporate Address in Rhode Island**

No. and Street: 11 BROAD COMMON ROAD, UNIT 155

City or Town: BRISTOL

State: RI Zip: 02809 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**

TO ASSIST THE TOWN OF BRISTOL IN THEIR EFFORTS TO PROVIDE A SAFE AND HEALTHY ENVIRONMENT FOR THE SICK, ABUSED, ABANDONED AND HOMELESS ANIMALS THAT COME INTO THE CARE OF THE BRISTOL ANIMAL SHELTER UNTIL THEY FIND THEIR FOREVER HOME.

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
TREASURER	LORI SENDROFF	49 BAGY WRINKLE COVE WARREN, RI 02885 USA
SECRETARY	JOCEYLN TURNER	P.O. BOX 361 LITTLE COMPTON, RI 02837 USA
BOARD MEMBER	JOSHUA CANARIO	15 RIVERVIEW AVENUE BRISTOL, RI 02809 USA
VICE PRESIDENT	JOHN LANNAN	3 DORIS AVENUE BRISTOL, RI 02809 USA
PRESIDENT	DYANNE GIBREE	3 MILFORD STREET BRISTOL, RI 02809 USA
HONORARY MEMBER	EDWARD WAKEM, DVM	9635 EGRET LANE CHESTERFIELD, VA 23838 USA
DIRECTOR	JULIE BRIGIDI	93 HIGHLAND ROAD BRISTOL, RI 02809 USA
DIRECTOR	TIM SWEENEY	82 CHURCH STREET BRISTOL, RI 02809 USA
DIRECTOR	BETTY BRITO	161 POPPASQUASH ROA BRISTOL, RI 02809 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**

DYANNE GIBREE 395 METACOM AVENUE BRISTOL , RI 02809

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

**Signed this 7 Day of June, 2019 at 8:37:14 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 LORI SENDROFF  
Signature of Authorized Person

Form No. 631  
Revised 09/07