Department of State - Business Services Division

Annual Report for the year: Non-Profit Corporation 2019

FILED

JUN 07 2019

→ 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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1. Entity ID Number 000026289	2. Exact name of the Corporation Narragansett Bay Quilters Association				
3. State of Incorporation RI	Brief description of the character of business conducted in Rhode Island To revive the art of quilting				
4. NAICS Code 813910					
6. Principal Office Address 1291 Middle Road			City East Greenwich	State RI	Zip 02818
7. List ALL officers (names and add	dresses)			Check the box to indic	ate an attachment
President Name Geri Bergreen			Vice-President Name Celia Schnacky		
Street Address 36 Butler Street			Street Address 36 Blackmore Street		
City Cranston	State RI	Zip 02920	City East Greenwich	State RI	Zip 02818
Secretary Name Nina Ashworth			Treasurer Name Susan Ellis		
Street Address 4 Barbara Court			Street Address 1291 Middle Road		
City Johnston	State RI	Zip 02919	City East Greenwich	State RI	Zip 02818
8. List ALL directors (names and a	ddresses). RI C	orporations MUST I	ist at least THREE directors.	Check the box to indic	ate an attachment
Director Name Hope Barton			Director Name Anne Sabatini		
Street Address 472 Allenhill Road			Street Address 61 Plaza Street		
City Brooklyn	State CT	Zip 06234	City Cranston	State RI	Zip 02920
Director Name Joan Potter			Director Name Louise Pankiewicz		
Street Address 264 Sutton Ave			Street Address 55 Island Drive		
City East Providence	State RI	Zip 02914	City Coventry	State RI	Zip 02816
9. Registered Agent in Rhode Islan	nd. This information	on is currently of recor	d in the Department of State. Chang	es require filing Form 64	¥1.
Under penalty of perjury, I decla statements, and that all stateme				companying schedu	ules and
This report must be signed by either the Pre	sident. Vice-Preside	nt. Secretary, Assistant S	ecretary, Treasurer, duly Authorized Repr	esentative, Receiver or Trus	stee
Name of Officer/Authorized Repres Susan E Ellis	sentative			Date 06/04/2019	
Signature of Officer/Authorized Re	presentative	, SIGN DOC	UMENT HERE		

WAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040