State of Rhode Island and Providence Plantations Fee: \$20.00 Office of the Secretary of State			
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. 000458139			
2. Name of Corporation South County Growers' Association			
3. State of Incorporation			
State: <u>RI</u>			
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			
<u>813910</u>			
4. Corporate Address in Rhode Island			
No. and Street: 11 INDIAN CORNER ROAD			
City or Town: SAUNDERSTOWN State: RI Zip: 02874 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 SUPPORT AND BETTERMENT OF RHODE ISLAND LOCAL INDEPENDENT FARMS			
AND ARTISANS, TO IMPROVE THE AVAILABILITY OF LOCALLY GROWN RHODE ISLAND PRODUCE AND RELATED ACTIVITIES			
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Incorporator is no longer applicable; please delete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	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	NINA L LUCHKA	460 SHUMANKANUC HILL RD CHARLESTOWN, RI 02813 USA
TREASURER	J TIMOTHY KOCAB	11 INDIAN CORNER RD SAUNDERSTOWN, RI 02874 USA
SECRETARY	AUBURN D COLE	230 BELL SCHOOLHOUSE RD WEST KINGSTON, RI 02892 USA
VICE PRESIDENT	WILLIAM A COULTER	363 SHUMANKANUC HILL RD CHARLESTOWN, RI 02813 USA
DIRECTOR	J TIMOTHY KOCAB	11 INDIAN CORNER RD SAUNDERSTOWN, RI 02874 USA
DIRECTOR	WILLIAM A COULTER	363 SHUMANKANUC HILL RD CHARLESTOWN, RI 02813 USA
DIRECTOR	NINA L LUCHKA	460 SHUMANKANUC HILL RD CHARLESTOWN, RI 02813 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

J. TIMOTHY KOCAB 11 INDIAN CORNER ROAD SAUNDERSTOWN, RI 02874

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 June, 2019 at 3:28:23 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 J. TIMOTHY KOCAB

Signature of Authorized Person

Form No. 631 Revised 09/07

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