RI SOS Filing Number: 201900742650 Date: 6/28/2019 4:00:00 PM



State of Rhode Island and Providence Plantations

## **Department of State - Business Services Division**

Annual Report for the year: **Non-Profit Corporation** 

RECEIVED DECRETARY OF STATES FIP CORPORATIONS DIV

2019 JUN 28 PM 12: 17

-> Filing period: June 1 - June 30

→ Filing Fee: \$20 00

-> Penalty. Additional \$25.00 fee if form is not filed by July 30.

1, Entity ID Number	2. Exact name of the Corporation	De l Temple.	Inc	
3. State of Incorporation	5. Brief description of the character	of business conducted in Rhode Isla		
RI	Communi		119104	lS
4. NAICS Code	Gervices	,		
813110	Scr viec -			_
6. Principal Office Address	11111	City	State	Zip AA S
QTLLAURE.	1HILLANCE	Cranson	K	02920
7. List ALL officers (names and add	dresses)	<del></del>	k the box to indicate	e an attachment
ESTIC EUGENE	eferry	Vice/President Name PCI	ry	
Street Address Laure	HILAVE	Cotal Laurel A	4111 A	R
Chancton	State 7 2920	E ranston	SIR I	702920
Ferry Perry		Treasurer Name	•	
Street Address Laure	HillAre	Street Address		
city/anston	PI 20926	City	State	Zıp
8. List ALL directors (names and addresses) RI Corporations MUST list at least THREE directors.  Check the box to indicate an attachment				
8. List ALL directors (names and ac	ddresses) RI Corporations MUST lis		k the box to indicate	an attachment
8. List ALL directors (names and ac	ne Perry		ck the box to indicate	e an attachment
-	Deferry  LHILAVE	Chec	the box to indicate	e an attachment
Dregor Dame Euger	RI Corporations MUST list  REPORT  AND AVE  Stage T Zig 2920	Director Name  Chec	sk the box to indicate	an attachment   VC  Zip 22
Dregor Dame Euger	referry [Hill Ave	Director Name  Chec	State T	e an attachment   YC  Zip 2721
Overon James Euger Greet Address Laure City ranston	referry [Hill Ave	Street Address)  One of the control	Stap T	e an attachment   YC  Zip 22
Street Add/ess Laure City (a) St ON  Street Add/ess Laure City (a) St ON  Street Add/ess Donn  Street Add/ess DShorn	referry [Hill Ave	Director/Name  Street Address	State Dox to indicate	e an attachment   VC  Zip)2921  E  DD2740
Street Address Laure  City Pan Ston  Street Address Laure  City Pan Ston  Street Address Shorn  Elly Pan idence	Peferry  I Hill Ave  SINCE  SI	Director/Name  Street Address	HIILA SET SON APT I	in attachment
Street Address Laure City a STON Street Address More Street Address Shorn Street Address Shorn Street Address Shorn 9. Registered Agent in Rhode Islan Under penalty of perjury, I declar	PEPERY  I HILL AVE  Stap I Zip 900  Stap I Zip 900  Stap I Zip 900  This information is currently of record	Street Address  Oregor Name  Street Address  Oregor Name  Street Address  Oregor Name  Street Address  Oregor Name  Street Address  Street Address  Street Address  Street Address  Street Address  Oregor Name  Oregor Name  Street Address  Street Address  Street Address  Street Address  Oregor Name  Orego	State A  State A  State A  State A  uire filing Form 641.	re = 192921 E 192740
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Street Address City OSTON  Street Ridgess City OSTON  Street Ridgess Shorn  Street Ridgess Shorn  Street Ridgess Shorn  June Company  9. Registered Agent in Rhode Islan  Under penalty of perjury, I declar  statements, and that all statement  This report must be signed by either the Press  Name of Officer/Authorized Repres	State I Zip 2000  State I Zip 2000  State I Zip 2000  Sign I Zip 2000  d. This information is currently of record re and affirm that I have examined into contained herein are true and co	Street Address  Street Address  Orector Name  Street Address  Orector Name  Street Address  Orector Name  Street Address  Street Address  Orector Name  Stre	State I  State I  State I  State A  uire filing Form 641.  anying schedule  ve. Receiver or Trustee	YC 21992921 E 192740 es and
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**Division of Business Services** 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.nigov 4506J91

FORM 631 - Revised: 11/2017