



State of Rhode Island and Providence Plantations

## Department of State - Business Services Division

Annual Report for the year: **2019**

Non-Profit Corporation

→ Filing period June 1 - June 30

→ Filing Fee \$20.00

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

STAMP

FOR

JUL 18 2019

BY

37108 DS

1. Entity ID Number <b>000560494</b>		2. Exact name of the Corporation <b>The Supper Table</b>			
3. State of Incorporation <b>Rhode Island</b>		5. Brief description of the character of business conducted in Rhode Island <b>Charitable purpose including but not limited to serving needs of undernourished</b>			
4. NAICS Code <b>624210 - Community Food Serv</b>					
6. Principal Office Address <b>P.O. Box 1653</b>			City <b>Westerly</b>	State <b>RI</b>	Zip <b>02891</b>
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Sylvia Blanda</b>			Vice-President Name <b>Debra Pendola</b>		
Street Address <b>56 East Park Lane</b>			Street Address <b>5 Quail Run</b>		
City <b>Kingston</b>	State <b>RI</b>	Zip <b>02881</b>	City <b>Westerly</b>	State <b>RI</b>	Zip <b>02891</b>
Secretary Name <b>Cami Gordon</b>			Treasurer Name <b>Carolyn Dickey</b>		
Street Address <b>4 Rosemount Lane</b>			Street Address <b>4 Fairfield Drive</b>		
City <b>Westerly</b>	State <b>RI</b>	Zip <b>02891</b>	City <b>Westerly</b>	State <b>RI</b>	Zip <b>02891</b>
8. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>Christine Davidson</b>			Director Name <b>Arlene Hawkins</b>		
Street Address <b>3 Boiling Spring Avenue</b>			Street Address <b>22 Juniper Avenue</b>		
City <b>Westerly</b>	State <b>RI</b>	Zip <b>02891</b>	City <b>Westerly</b>	State <b>RI</b>	Zip <b>02891</b>
Director Name <b>Toni Skocic</b>			Director Name <b>Joan Serra</b> <b>Nancy Blyak</b>		
Street Address <b>19 Mohegan Trail</b>			Street Address <b>91 Tower Street</b> <b>116 Winnonavg Rd</b>		
City <b>Westerly</b>	State <b>RI</b>	Zip <b>02891</b>	City <b>Westerly</b>	State <b>RI</b>	Zip <b>02891</b>
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641					
<b>Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.</b>					
<small>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee</small>					
Name of Officer/Authorized Representative <b>Sylvia Blanda</b>				Date <b>7/16/19</b>	
Signature of Officer/Authorized Representative <i>Sylvia C Blanda</i>				SIGN DOCUMENT HERE	

## MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.ri.gov