



State of Rhode Island and Providence Plantations  
Department of State - Business Services Division

**FILED**

JUN 29 2020

0278

Annual Report for the year:

Non-Profit Corporation

2020

→ 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<br><b>59507</b>   |                      | 2. Exact name of the Corporation<br><b>ALPHA CHI OMEGA HOUSE CORPORATION FOR GAMMA SIGMA CHAPTER</b>   |  |                      |                          |
| 3. State of Incorporation<br><b>R.I.</b>  |                      | 5. Brief description of the character of business conducted in Rhode Island<br><b>PROVIDE HOUSING FOR A SORORITY CHAPTER AT THE UNIVERSITY OF RHODE ISLAND</b> |  |                      |                          |
| 4. NAICS Code<br><b>611310</b>  |                      |  |  |                      |                          |
| 6. Principal Office Address<br><b>2783 KINGSTOWN ROAD</b>   |                      | City<br><b>KINGSTON</b>  |  | State<br><b>R.I.</b> | Zip<br><b>02881</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<br><b>SUSAN M. SMITH</b>   |                      |  | Vice-President Name<br><b>DIANE JANAROS</b>    |                      |                          |
| Street Address<br><b>112 WESTWIND ROAD</b>  |                      |  | Street Address<br><b>3 MICHAEL TERRACE</b>     |                      |                          |
| City<br><b>SOUTH KINGSTOWN</b>  | State<br><b>R.I.</b> | Zip<br><b>02879</b>  | City<br><b>NEWPORT</b>                         | State<br><b>RI</b>   | Zip<br><b>02840</b>      |
| Secretary Name<br><b>JENNIFER BRACKETT</b>  |                      |  | Treasurer Name<br><b>LINDA MERLINO</b>         |                      |                          |
| Street Address<br><b>10 ASPINET DRIVE</b>   |                      |  | Street Address<br><b>15 ANN MARY BROWN DR.</b> |                      |                          |
| City<br><b>WARWICK</b>  | State<br><b>RI</b>   | Zip<br><b>02888</b>  | City<br><b>WARWICK</b>                         | State<br><b>RI</b>   | Zip<br><b>02888</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 checked="" type="checkbox"/></span> |                      |  |  |                      |                          |
| Director Name<br><b>SUSAN M. SMITH</b>  |                      |  | Director Name<br><b>DIANE JANAROS</b>          |                      |                          |
| Street Address<br><b>112 WESTWIND ROAD</b>  |                      |  | Street Address<br><b>3 MICHAEL TERRACE</b>     |                      |                          |
| City<br><b>SOUTH KINGSTOWN</b>  | State<br><b>RI</b>   | Zip<br><b>02879</b>  | City<br><b>NEWPORT</b>                         | State<br><b>RI</b>   | Zip<br><b>02840</b>      |
| Director Name<br><b>JENNIFER BRACKETT</b>   |                      |  | Director Name<br><b>LINDA MERLINO</b>          |                      |                          |
| Street Address<br><b>10 ASPINET DRIVE</b>   |                      |  | Street Address<br><b>15 ANN MARY BROWN DR.</b> |                      |                          |
| City<br><b>WARWICK</b>  | State<br><b>RI</b>   | Zip<br><b>02888</b>  | City<br><b>WARWICK</b>                         | State<br><b>RI</b>   | Zip<br><b>02888</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>                   |                      |  |  |                      |                          |
| <i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>  |                      |  |  |                      |                          |
| Name of Officer/Authorized Representative<br><b>JENNIFER BRACKETT, SECRETARY</b>  |                      |  |  |                      | Date<br><b>6-25-2020</b> |
| Signature of Officer/Authorized Representative<br><i>Jennifer Brackett</i>  |                      |  |  |                      |                          |

## **Attachment for the Non-Profit Corporation Annual Report for 2020**

**Entity ID:** 59507, Alpha Chi Omega House Corporation Board for Gamma Sigma Chapter

### **Section 8: List of Directors (Continued)**

Marian Bowers  
43 Conant Lane  
Kingston, RI 02881

Christine Fuller  
6 Juniper Drive  
Ashaway, RI 02804

Kathryn Gennari  
431 Broad Rock Road  
Wakefield, RI 02879

Nancy Gage  
49 Roger Williams Avenue  
Rumford, RI 02916