



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
 Office of the Secretary of State - Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2015

Filing Period: June 1 - June 30 • This report must be typed or printed legibly.
 Filing Fee: \$20.00 • FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

| | | | | | |
|--|--------------------|--|---|--------------------|---------------------|
| 1. Entity ID No. <u>27747</u> | | 2. Exact name of the Corporation <u>Le Foyer</u> | | | |
| 3. State of Incorporation <u>RI</u> | | 4. Brief description of the character of business conducted in Rhode Island <u>COMMUNITY ORGANIZATION TO PROMOTE FRENCH CULTURE</u> | | | |
| 5. Principal office address <u>151 FOUNTAIN ST</u> | | | City <u>PANT</u> | State <u>RI</u> | Zip <u>02860</u> |
| 6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> | | | | | |
| President Name <u>ROGER R BONIN JR</u> | | | Vice-President Name <u>NORMAN DESMARIS</u> | | |
| Street Address <u>2 Foy, Drive</u> | | | Street Address <u>467 River Rd</u> | | |
| City <u>LINCOLN</u> | State <u>RI</u> | Zip <u>02865</u> | City <u>LINCOLN</u> | State <u>RI</u> | Zip <u>02865</u> |
| Secretary Name <u>JANE BLANCHETTE</u> | | | Treasurer Name <u>RONALD THIBAUDEAU</u> | | |
| Street Address <u>16 WILMINGTON RD</u> | | | Street Address <u>P.O. Box 401</u> | | |
| City <u>PANT</u> | State <u>RI</u> | Zip <u>02861</u> | City <u>WYOMING</u> | State <u>RI</u> | Zip <u>02898</u> |
| 7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> | | | | | |
| Director Name <u>Richard Riendeau</u> | | | Director Name <u>PHIL PATRANDE</u> | | |
| Street Address <u>34 BLAISDELL AVE</u> | | | Street Address <u>63 PINECRECK DR</u> | | |
| City <u>PANT</u> | State <u>RI</u> | Zip <u>02860</u> | City <u>WYOM</u> | State <u>RI</u> | Zip <u>02888</u> |
| Director Name <u>RAY PATRANDE</u> | | | Director Name | | |
| Street Address <u>1089 DOWNEY ST</u> | | | Street Address | | |
| City <u>New Bedford</u> | State <u>MA</u> | Zip <u>02745</u> | City | State | Zip |
| 8. REGISTERED AGENT IN RHODE ISLAND | | | | | |
| This information is currently of record in the Office of the Secretary of State. Changes require filing Form 641. | | | | | |

RECEIVED
 SECRETARY OF STATE
 CORPORATIONS DIV
 2015 JAN 11 PM 4:19

This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee

File Date _____
 Check No _____
 By: _____
 FOR SECRETARY OF STATE USE ONLY

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.

FILED

JAN 11 2016

[Signature] _____
 Signature of Officer or Authorized Representative Date Jan 11, 2016

ROGER R BONIN JR
 Print or Type Name of Officer or Authorized Representative

By [Signature]
 A.A.