



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

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RECEIVED
 SECRETARY OF STATE
 CORPORATIONS DIV
 2016 APR 18
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Non-Profit Corporation Annual Report for the year: "2016"

Filing period: June 1 - June 30

Filing Fee: \$20.00 *FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID Number 1022218		2. Exact name of the Corporation Cool Moose Party			
3. State of Incorporation R.I.		4. Brief description of the character of business conducted in Rhode Island Political organization			
5. Principal Office Address 167 Columbus Avenue			City Pawtucket	State RI	Zip 02860
6. List ALL officers (names and addresses). Check the box to indicate an attachment <input type="checkbox"/>					
President Name Grant Garvin			Vice-President Name -		
Street Address 167 Columbus Avenue			Street Address		
City Pawtucket	State RI	Zip 02860	City	State	Zip
Secretary Name -			Treasurer Name David Weesner		
Street Address			Street Address 106 Frederick Street		
City	State	Zip	City Bumford	State RI	Zip 02910
7. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Grant Garvin			Director Name David Weesner		
Street Address 167 Columbus Avenue			Street Address 106 Frederick Street		
City Pawtucket	State RI	Zip 02860	City Bumford	State RI	Zip 02910
Director Name			Director Name Gloria Garvin		
Street Address			Street Address 75 Pine Crest Drive		
City	State	Zip	City East Providence	State RI	Zip 02915
8. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
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.					
This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.					
Name of Officer/Authorized Representative Grant Garvin, President				Date 4/17/2016	
Signature of Officer/Authorized Representative 					

FILED

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By 272535