(8)

State of Rhode Island and Providence Plantations

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

Annual Report for the year: 2016

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.

	FILED	
BY	JUL 13 2016 2932	2

1. Entity ID Number	2. Exact name of the Corporation					
000029322	The Pawtucket Day Nursery Association					
3. State of Incorporation	4. Brief description of the character of business conducted in Rhode Island					
Rhode Island	Chi	ld care.				
5. Principal Office Address		<u>-</u>	City	State	Zip	
25 Thornley Street			Pawtucket	RI	02860	
6. List ALL officers (names and a	ddresses)		Che	ck the box to indi	cate an attachment	
President Name Joseph A. Lamagna			Vice-President Name James Campagna			
Street Address 23 Aurora	Drive		Street Address 15 Leila Jean Drive			
City Cumberland	State RI	Zip 02864	City Bristol	State RI	Zip 02809	
Secretary Name  John B. Affleck, Esquire  Treasurer Name  Anthony Dennis						
Street Address 18 Memoria	al Avenue		Street Address 6 Charity Drive			
City Lincoln	State RI	Zip 02865	City Warren	State RI	Zip 02885	
7. List ALL directors (names and	addresses). RI	Corporations <b>MU</b>	ST list at least THREE directors.	Check the box to in	ndicate an attachment X	
Director Name  Joseph A. Lamagna  Director Name  James Campagna						
Street Address 23 Aurora Drive			Street Address 15 Leila Jean Drive			
City Cumberland	State RI	Zip 02864	City Bristol	State RI	Zip 02809	
Director Name Anthony De	ennis		Director Name	Affleck, E	squire	
Street Address 6 Charity Drive			Street Address 18 Memorial Avenue			
City Warren	State RI	Zip 02885	City Lincoln	State RI	Zip 02865	
8. Registered Agent in Rhode Isla	and. This informat	ion is currently of r	ecord in the Department of State. Char	nges require filing F	orm 641.	
Under penalty of perjury, I deci statements, and that all statem			nined this report, including any a and correct.	eccompanying s	chedules and	
This report must be signed by either the Pr	esident, Vice-Presid	ent, Secretary, Assista	ant Secretary, Treasurer, duly Authorized Rej	presentative, Receiver	or Trustee.	
Name of Officer/Authorized Repre	•	-		Date	7	
Signature of Officer/Authorized Re	AMA	WA		July	7, 2016	
Signature of Officer/Authorized Re	epresentative /		LUMENT HERE			

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

Phone: (401) 222-3040 Website: www.sos.ri.gov 士D29322

FILED

JUL 13 2016

ADDITIONAL DIRECTORS

The Pawtucket Day Nursery Association

Director Name				Check the box to	o indicate an attachme
Arlene Garrison Street Address 33 Spencer Avenue			Director Name		
			Matt West		
			Street Address 112 Poplar Avenue		
City Greenville	State	Zip	City	<del></del>	
	RI	02828	N. Kingstown	State RT	Zip
Director Name Kate Nelson			Director Name	<del></del>	02852
Street Address 3628 Pawtucket Avenue			Lisa Rafferty		
			Street Address		
Citv	State	Zip	Bridges, Inc., P.O. Box 263		
East Providence	_ RI	02915	City Jamestown	State RI	Zip 02835

Director Name				<del></del>		Check the box	to indicate an attachment
	Dennis	Sawyer		Director Name	· · · · · · · · · · · · · · · · · · ·		
Street Address Geneva Plaza, 150 Dartmouth St.			<u> </u>	James	3 Hill		
City	B108	<del></del>	Dartmouth St.	Street Address	Centerdale Apt. 709	Manor, 2	074 Smith Stree
Pawtuc]	ket	State RI	Zip	City		State	
Director Name			02860	N. Prov	idence	RI	Zip 02911
			Director Name		<del></del>	<u> </u>	
Street Address		<del> </del>					
_				Street Address			
City		State	T_:				
•		State	Zip	City		State	Zip