



**State of Rhode Island
Office of the Secretary of State**

Fee: \$20.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Non-Profit Corporation
Annual Report**

Filing Period: February 1 - May 1

In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2022

1. Corporate ID No. 000026628

2. Name of Corporation The Apponaug Free Library Association

3. State of Incorporation

State: RI

ARTICLE III

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code

4. Principal Office Address

No. and Street: 3267 POST ROAD
City or Town: WARWICK State: RI Zip: 02886 Country: USA

5. Brief Description of the Character of the Affairs Conducted in Rhode Island

BOOK LOANS

6. Names and Addresses of the Officers and Directors:

All Directors and Officers must be listed individually. The number of DIRECTORS of a Rhode Island Corporation shall not be less than 3.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	DEBORAH A REX	180 MOBBS SCHOOL ROAD ARAB, AL 35016 USA
TREASURER	PATRICIA M SELTZER	7770 VAUGHN RD

		TILLAMOOK, OR 97141 USA
SECRETARY	DONNA CRAMER	5 CHESLEY WAY SOUTH YARMOUTH, MA 02664 USA
DIRECTOR	DONALD J CRAMER	2473 COUNTY RD. 1942 ARANSAS PASS, TX 78336 USA
DIRECTOR	KATHRYN E CALLAHAN	68 NIANTIC TRAIL WEST GREENWICH, RI 02817 USA
DIRECTOR	ROBERT E SELTZER	7770 VAUGHN RD TILLAMOOK, OR 97141 USA

**7. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

KATHRYN E. CALLAHAN 68 NIANTIC TRAIL WEST GREENWICH , RI 02817-1941

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

Signed this 6 Day of April, 2022 at 8:08:03 AM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By KATHRYN CALLAHAN
Signature of Authorized Person

Form No. 631
Revised 09/07

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