



**State of Rhode Island and Providence Plantations
Office of the Secretary of State**

Fee: \$20.00

Corporations Division
148 W. River Street
Providence, Rhode Island 02904-2615
Telephone: (401) 222-3040

**Foreign Non-Profit
Annual Report**

Filing Period: June 1 - June 30

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: 2009

1. Corporate ID No. 000149128

2. Name of Corporation North Seattle Community College Foundation

3. State of Incorporation

State: WA

4. Corporate Address in Rhode Island

No. and Street: 155 SOUTH MAIN ST. SUITE #301

City or Town: PROVIDENCE

State: RI Zip: 02903 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 2815 2ND AVENUE, SUITE 280

City or Town: SEATTLE State: WA Zip: 98121 Country: USA

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

OFFERING CONSUMER CREDIT COUNSELING SERVICES TO THE PUBLIC INCLUDING DEBT MANAGEMENT PLANS AND CREDITOR INTERVENTION SERVICES

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
TREASURER	CINDY R SEREMEK	2815 2ND AVENUE #280 SEATTLE, WA 98121 USA
DIRECTOR	JEROME B. GRONFEIN	2901 3RD AVE, SUITE 200 SEATTLE, WA 98111
PRESIDENT	HENRY F KEATON	2815 2NDAVENUE, STE. 280 SEATTLE, WA 98121- USA
DIRECTOR	JOSEPH F JAHN	1144 NW 53RD ST. SEATTLE, WA 98107 USA
DIRECTOR	RONALD H LAFAYETTE	9600 COLLEGE WAY N SEATTLE, WA 98103 USA
DIRECTOR	WILLIAM H MASON	2815 2ND AVE., SUITE 280 SEATTLE, WA 98121 USA
DIRECTOR	JAMES R MEDLEY	2815 2ND AVE., SUITE 280 SEATTLE, WA 98121 USA
DIRECTOR	WILLIAMS JARVIS	819 NW CULBERTSON DR. SEATTLE, WA 98177 USA

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

CT CORPORATION SYSTEM 155 SOUTH MAIN STREET, SUITE 301 PROVIDENCE , RI 02903

9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver, or Trustee.

Signed this 18 Day of May, 2009 at 12:09:31 PM. *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 corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By CINDY R SEREMEK
Signature of Officer of the Corporation

President or Vice President or Secretary or Assistant Secretary or

Treasurer or Receiver or Trustee (check one)

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in Section 7.

Form No. 631
Revised 09/07