



**State of Rhode Island and Providence Plantations
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: 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: 2020

1. Corporate ID No. 001670442

2. Name of Corporation Navigant Credit Union Charitable Foundation, Inc.

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
813211

4. Corporate Address in Rhode Island

No. and Street: 1005 DOUGLAS PIKE
City or Town: SMITHFIELD State: RI Zip: 02917 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:
City or Town: State: Zip: Country:

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

ARTICLE III(A) OF THE ARTICLES OF INCORPORATION OF THE CORPORATION IS HEREBY AMENDED IN ITS ENTIRETY TO READ AS FOLLOWS: A: TO GIVE BACK TO THE COMMUNITY BY SUPPORTING, PROMOTING, AND FURTHERING CHARITABLE, EDUCATIONAL, CULTURAL, SCIENTIFIC, AND PUBLIC HEALTH PURPOSES, ACTIVITIES, AND CAUSES, PRIMARILY (BUT NOT EXCLUSIVELY) AFFECTING COMMUNITIES IN WHICH NAVIGANT CREDIT UNION HAS BRANCH OFFICES OR MEMBERS, INCLUDING MAKING DISTRIBUTIONS TO ORGANIZATIONS THAT QUALIFY

AS EXEMPT ORGANIZATIONS DESCRIBED UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE FOR SUCH PURPOSES, ACTIVITIES, AND CAUSES.

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	GARY E. FURTADO	1005 DOUGLAS PIKE SMITHFIELD, RI 02917 US
TREASURER	LISA G DANDENEAU	1005 DOUGLAS PIKE SMITHFIELD, RI 02917 US
SECRETARY	TIMOTHY J DRAPER	1005 DOUGLAS PIKE SMITHFIELD, RI 02917 US
DIRECTOR	ANN M KASHMANIAN	1005 DOUGLAS PIKE SMITHFIELD, RI 02917 USA
DIRECTOR	JAMES K SALOME	1005 DOUGLAS PIKE SMITHFIELD, RI 02917 USA
DIRECTOR	GARY E. FURTADO	1005 DOUGLAS PIKE SMITHFIELD, RI 02917 USA
DIRECTOR	LISA G. DANDENEAU	1005 DOUGLAS PIKE SMITHFIELD, RI 02917 USA
DIRECTOR	TIMOTHY J. DRAPER	1005 DOUGLAS PIKE SMITHFIELD, RI 02917 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**

LISA G. DANDENEAU 1005 DOUGLAS PIKE SMITHFIELD , RI 02917

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

Signed this 30 Day of June, 2020 at 10:45:05 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 LISA DANDENEAU
Signature of Authorized Person

Form No. 631
Revised 09/07

