

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

A. Ralph Mollis, Secretary of State

Corporations Division
148 W. River Street
vidence RI 02904-2615

Providence, RI 02904-2615 401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2007

Filing Period: June 1 - June 30 • Filing Fee: \$20.00 * THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK * 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.

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1. Corporate ID No. 138175	2. Name of Corporation Mark Woodbury S	cholarship Fund						
3. State of Incorporation RHODE ISLAND	4. Corporate address in		oad 5-B	Warwie	Il Zip	2886		
5. Foreign corporation. Enter prin	cipal office address .	7	City	State	Zip			
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island TO PROVIDE A SCHOLARSHIP FOR STUDENTS INTERESTED IN PURSING A CAREER IN LAW ENFORCEMENT AND RESIDING IN THE TOWN OF SCITUATE, RHODE ISLAND								
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS								
Joseph P. Checrallah Jr.			Dennis Lavoie					
Street Garden Box 402			3 Snruce Valley Dr.					
Providence	State RI	Zip 02901	Scituate	State 175	zip C	12857		
secretary Named . Car	sece		Treasurer Name					
Street Address Eagle	Dr.		Street Address					
City Hope	state RI	D2831	City	State	Zip			
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS								
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23 Director Name Director Name								
Joseph Checrallah Jr.			Leslie Capece					
Street Address J Above			Street Address Above					
City	State	Zip	City	State	Zip	:		
Dennis Lavoie			Director Name					
Street Address Above			Street Address					
City	State	Zip	City	State	Zý			
9. REGISTERED AGENT IN I	RHODE ISLAND - D	O NOT ALTER - Chan	ges require filing of Form 64	1 - R.I.G.L. 7-6	-13 / 7-6- 78			
Agent Name HARRY J. HOOPIS			Address		1000 000 0000			
Address 33 COLLEGE HILL ROAD, 5-B			City WARWICK	Zip	02886- 🔀			
This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee								

	138175	
File Date	FILED	
By: FOR SECRETARY	PR 0 3 2008 0 5 4 10 0 8 OF STATE USE ONLY	

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.

Signature of Officer

Date

Print or Type Name of Officer

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Title of Officer