



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

A. Ralph Mollis, Secretary of State  
Corporations Division  
148 W. River Street  
Providence, RI 02904-2615  
401.222.3040

**NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008**

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.

1. Corporate ID No. <del>713213843</del>		2. Name of Corporation The Enea Project - Corp Id 000163752	
3. State of Incorporation RI		4. Corporate address in Rhode Island - Street Address PO Box 15071	
		City Riverside	Zip 02915
5. Foreign corporation. Enter principal office address		City	State
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island educating others on beach / ocean safety - preparing materials + events			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Michelle Koles		Vice President Name	
Street Address 79 Leroy Dr		Street Address	
City Riverside	State RI	Zip 02915	
Secretary Name Ann Koles		Treasurer Name Michelle Koles	
Street Address 10 Foxboro Dr		Street Address	
City Nashua	State NH	Zip 03063	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 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 Holly Potter		Director Name Shannon Hedther	
Street Address 11 Burgess Street		Street Address 47 Roberta Rd	
City Nashua	State NH	Zip 03064	City Blackstone
			State MA
			Zip 01504
Director Name Don Smith		Director Name	
Street Address 119 Sutton Rd		Street Address	
City Webster	State MA	Zip 01570	
9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78			
Agent Name Michelle D Koles		Address 79 Leroy Dr	
Address		City Riverside	Zip 02915

RECEIVED  
2008 JUN 7 AM 11:14  
SECRETARY OF STATE  
CORPORATIONS DIV

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

**FILED**

File Date JUN 17 2008

Check No. By 066946

By: \_\_\_\_\_

FOR SECRETARY 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.

Michelle Koles May 28, 2008  
Signature of Officer Date

President - Michelle Koles  
Print or Type Name of Officer

President  
Title of Officer