



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. 125205		2. Name of Corporation The James "Bean" Herndon Musician's Scholarship fund, Inc			
3. State of Incorporation RI		4. Corporate address in Rhode Island - Street Address P.O. Box 2579 Providence, RI 02905 or 365 Sayles		City Providence	Zip 02905
5. Foreign corporation. Enter principal office address 2253		City	State	Zip	
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island Scholarships for High School Seniors - ARTS and musical.					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Kevin Gibbs Simon			Vice President Name		
Street Address 73-2 Dartmouth Ave			Street Address		
City Providence	State RI	Zip 02907	City	State	Zip
Secretary Name DARRIE HORTON			Treasurer Name Gloria Caffey		
Street Address 63 Dartmouth Ave			Street Address 365 Sayles St		
City Providence	State RI	Zip 02907	City Providence	State RI	Zip 02905
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 Harold Simon			Director Name McKinley Adam		
Street Address 88 Brittney farms Rd			Street Address 12 Cabell Street		
City New Britain	State Conn	Zip 06053	City Providence	State RI	Zip 02905
Director Name Marnita Lucas			Director Name		
Street Address 285 Niagara St			Street Address		
City Providence	State RI	Zip 02907	City	State	Zip
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			Address		
Address			City	Zip	

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

FILED

File Date: JUN 30 2008

Check No. BY: 183

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.

Signature of Officer: Gloria Caffey Date: 6-22-08
 Print or Type Name of Officer: Gloria Caffey
 Title of Officer: Treasurer