

A. Ralph Mollis, Secretary of Sta Corporations Divisio

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 LEGISLAND.

148 W. River Stre
Providence, RI 02904-261
401.222.**3040**

* In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file it penalty fee of \$25.00.	s annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a			
1 Corporate ID No. 2. Name of Corporation; 000083986 MLK. JR. Charitable John	lapshin POLF FUND TUC.			
Distate office office of the composition of the property of th				
5 Foreign corporation. Enter principal office address	City State Zip			
6, Brief Description of the character of the affairs which are actually conducted in Rhode Island CORIN TOURNAMENT TO VOISE MONEY TO AWARD SCHOLARShips to DESERVING > STUDENTS OF ANY VACC.				
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS President Name				
Street Address - Street	Barbara tuller			
PO BOX 2203	Cipy / State D Zip			
Secretary Name T D D D D D D D D D D D D D D D D D D	Fa. PROVIDENCE RT 02914-2407			
Street Address JOSEPH R. Drody	Street Address			
City O NaISey State Zip 5 2014	Cuni 10 Na 13ey 5treet			
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACK	THE PORT KL U2840 CHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name Police Huntley	Director Name (15 to her BOULE ESO:			
3a5 Pullic Street	Siree Adgrees DX 1386			
POUIDENCE STATE POR DAYOS	Newport State RI 202846.			
Intector Name Jason Fowler	Director Name			
333 Niantia AVENUE	Street Address			
Ranston RI 20007. 9. REGISTERED AGENT IN RHODE ISLAND JOSEPh	R. R. R. Col.			
This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-78				
This report must be signed by either the President, Vice Pres	sident, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee			

File Date Check No. FILED By: MAR 26 2009	Under report staten	<i>(</i> √) · ⊃	
Check No.	iohas		File Date
	orini	70.	Check No.
FOR SECENTIAL VIE ONLY	Title a	/ / /	Ву:

Under penalty of perjury, I declare and affirm that	at I have examined this
port, including any accompanying schedules and	
statements contained herein are true and correct.	
Joseph K. Lkader	3-24-09
ighafure of Officer	Date
Joseph R. Brad	<i>V</i>
rint of Type Name of Officer	کا انتخاب کا انتخاب
Secretary 1 1Reasu	RERI
Title of Officer	Form 631 Rev. 09/17