

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 2009

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.	2. Name of Con	2. Name of Corporation				
139852	The New N	The New NKHS Scholorship Fund				
3. State of Incorporation	4. Corporate ad	dress in Rhode Island - Street	Address	City	Zip	
Rhode Island	3 Stone Ga	ate Drive		North Kingstown	02852	
5. Foreign corporation. Enter principal office address			City	State	Zip	
6. Brief Description of the charac	ter of the affairs whic	th are actually conducted in R	bode Island			
Domestic non-Profit orga	nization					
7 NAMES AND ADDRESS	EE OF THE OF	CICEBE CAME BOY CODE				
President Name	SES OF THE OF	FICERS: ("X" BOX FOR A	TTACHMENT)	S BEFORE USING ATTACE	IMENTS	
John V Gibbons Jr.			Vice President Name			
Street Address	 -		None			
3 Stone Gate Drive			Street Address			
City	State	Zip	City	State	Zip	
North Kingstown	RI	02852	3.0	oune .	z.ip	
Secretary Name		102002	Treasurer Name			
Maureen A Ricker			Maureen A Ricker			
Street Address			Street Address			
37 Landing Lane			37 Landing Lane			
City	State	Zip	City	State	Zip	
North Kingstown	RI	02852	North Kingstown	RI	02852	
8. NAMES AND ADDRESS	ES OF THE DIR		ATTACHMENT) TILL IN SPACE	ES BEFORE USING ATTACE	IMENTS	
			ND) CORPORATION <u>SHALL NO</u>			
rector Name			Director Name			
Thomas Grennan			John Pyne	John Pyne		
Street Address			Street Address			
51 Jenkins Court			315 Butternut Drive			
City	State	Zip	Сйу	State	Zip	
North Kingstown	RI	02852	North Kingstown	RI	02852	
Director Name			Director Name	<u> </u>	1000	
Edward Whitaker						
Street Address			Street Address			
60 Linwood Road						
City	State	Zip	City	State	Zip	
North Kingstown	RI	02852	Ī			
9. REGISTERED AGENT II	N RHODE ISLAN	ND .		•	'	
This information is currently	y of record in the	Office of the Secretary of	of State. Changes require filing of I	Form 641 - R LG L. 7-6-13/7-	-6-78	

This report mu	ist be signed by	either the President, Vic	e President, Secretary, Assistant	Secretary, Treasurer, Receiv	er or Trustee	

■ 139852	
	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all
File DateFILED	statements contained herein are true and correct.
Theck No. MAY 1 5 2009	Ignature of Officer Date Maureen A Ricker
By: — By//	Print or Type Name of Officer
FOR SECRETARY OF STATE USE ONLY	Secretary/Treasurer