

A. Ralph Mollis, Secretary of State Corporations Division

148 W. River Street Providence, RI 02904-2615

2009

401.222.3040

## NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

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.					<u>,</u>		
L. Corporate ID No.		2. Name of Corporation					
110243	Friends of the	Friends of the Leonard Brown House at Glen Farm, Inc.					
3. State of Incorporation	=	ess in Rhode Island - Street A	ddress	City	( ·		
RHODE ISLAND	2200 EAST	MAIN ROAD		PORTSMOUTH	02871-1268		
5. Foreign corporation. Enter	principal office address		City	State Zip			
	<u></u>				<u> </u>		
6. Brief Description of the chara	acter of the affairs which	are actually conducted in Rh	ode Island				
ACTUEL CONKIDO DO	MAKE HOLICE AT (	CLENIEARM PORTSN	TACHMENT)   FILL IN SPA				
President Name			Vice President Name				
Craig L. Clark			Mary Lou Krol	Mary Lou Krol			
Street Address	<u> </u>		Street Address				
130 Hargraves Dr	<u></u>		24 Independence (		Tax.		
City	State	Zip	City	State	Zip		
Portsmouth	RI	02871	Portsmouth	RI	02871		
Secretary Name				Treasurer Name			
none				Mary Lou Krol			
Street Address			Street Address	<b>^</b> 4			
none			24 Independence C		Zip		
City	State	Zip	City	State	'		
none	none	none	Portsmouth	RI	02871		
8. NAMES AND ADDRE	SSES OF THE DIR	ECTORS: ("X" BOX FOR	ATTACHMENT) TILL IN SPA	ACES BEFORE USING ATTAC	mmenis		
THE NUMBER OF DIR.	ECTORS OF A DOM	MESTIC (RHODE ISLA	ND) CORPORATION SHALL	NOT BE LESS THAN THRE	<u>E (3). K.I.G.L. /-0-2;</u>		
Director Name				Director Name			
Luke Harding			Marybeth Clark				
Street Address	·		Street Address				
884 Union Street			130 Hargraves Dr		1		
City	State	Zip	City	State	Zip		
Portsmouth	RI	02871	Portsmouth	RI	02871		
Director Name			Director Name				
Craig L. Clark							
Street Address			Street Address				
130 Hargraves Dr					770		
City	State	Zip	City	State	Zip		
Portsmouth	RI	02871	ł	1	I		
9. REGISTERED AGEN	T IN RHODE ISLA	ND					
This information is curre	ently of record in the	e Office of the Secretary	of State. Changes require filing	of Form 641 - R.I.G.L. 7-6-13	<i>1</i> 7-6-78		
TPL:	must be signed by	aither the President Vi	ce President, Secretary, Assist	ant Secretary, Treasurer, Rec	eiver or Trustee		
inis report	must be signed by	older die Fresident, Tr	<del></del>	•			

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File Date	FILED
Check No.	AUG 25 2009
Ву:	By 504
	FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined thi
report, including any accompanying schedules and statements, and that al
statements contained herein are true and correct.

statements contained herein are true and correct.		
Manston land	8/4/6	99
Signature of Officer	*Do	ate

Mary Lou Krol

Print or Type Name of Officer

Vice President / Treasurer