

A. Ralph Mollis, Secretary of State Corporations Division 1-18 W. River Street Providence, RI 02904-2615 401.222,3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2010

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

penatty fee of \$25.00.						
1. Corporate ID No.	2. Name of Corporation					
144267	Lyn & Margaret Co	mfort Charitable Found	dation			
3. State of Incorporation	4. Corporate address in Rhode Island - Street Address			СЦу	Zip	
RI	62 Washington St	reet		Newport, RI	02840	
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						
Private foundation						
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS						
President Name			Vice President Name			
Margaret D. Comfort						
Street Address			Street Address			
62 Washington Street	T	T		T		
City	State	Zip	City	State	Zip	
Newport	RI	02840				
Secretary Name			Treasurer Name			
Lyn Comfort			Lyn Comfort			
Street Address			Street Address			
62 Washington Street			62 Washington Street			
City	State	Zip	City	State	Zip	
Newport	RI	02840	Newport	RI	02840	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR AITACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS						
	ORS OF A DOMESTIC	C (RHODE ISLAND) C	ORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23			
Director Name			Director Name			
Margaret D. Comfort			Emily J. Comfort			
Street Address			Street Address			
62 Washington Street			62 Washington Street			
City	State	Zip	City	State	Zip	
Newport	RI	02840	Newport	RI	02840	
Director Name			Director Name			
Lyn Comfort						
Street Address			Street Address			
62 Washington Street						
Сйу	State	Zip	City	State	Zip	
Newport	RI	02840	I			
9. REGISTERED AGENT IN RHODE ISLAND						
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 information is currently (
This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee						

	144267	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all
File Date	MAY 2 6 2010	statements contained herein are true and correct. May 15, 2010 Signature of Officer Date
Check No	By 119099	Margaret D. Comfort Print or Type Name of Officer
FOR S	SECRETARY OF STATE USE ONLY	President Title of Officer Form 631 Rev. 09/17