

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 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 penalty fee of \$25.00.

1. Corporate ID No.	2. Name of Corporation						
132677	Newport Yacht Cl	ub Endowment Fund					
3. State of Incorporation	4. Corporate address in Rhode Island - Street Address			City	Zip		
Rhode Island	36 Washington Square			Newport	02840		
5. Foreign corporation. Enter principal office address			City	State	Zip		
6. Brief Description of the character	of the affairs which are a	tually conducted in Rhode Isla	and				
To provide funds for the sup	port and maintenar	nce of Newport Yacht C	lub Sponsored Scholarship F	unds, for qualified stude	ents in married		
related educational program	ns offered by certifie	d universities, collages			arterit eine of the order of		
	S OF THE OFFICERS	6: ("X" BOX FOR ATTACH	MENT)	EFORE USING ATTACH	MENTS		
President Name			Vice President Name				
Ell Whitney			David Leys				
Street Address 2 Jean Street			Street Address				
City	State	Zip	599 Wolcott Avenue	State	Zιþ		
Middletown	RI	02842	Middletown	RI	02842		
Secretary Name	11/1	102042	Treasurer Name	T KI	102042		
Deborah Weller			Bud Heaton				
Street Address			Street Address				
21 Russell Avenue			63 Harrison Avenue				
City	State	Zip	City	State	Zip		
Newport	RI	02840	Newport	Ri	02840		
8. NAMES AND ADDRESSES							
THE NUMBER OF DIRECTO	れんまった まずり きゃくしん 40 エジーショ カリー カリー・デオー	· 解析 · 解析 · 作 · · · · · · · · · · · · · · · · ·	1.1 (金) (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (4.1) 1.1 (· (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4) · (4)	CAMPA DEBUT AND SELECTION OF THE SECOND OF T		
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Lorrie Babcock			Jean L. Babcock				
Street Address			Street Address				
33 Clearview Avenue			29 Indian Avenue				
City	State	Zip	City	State	Zip		
Portsmouth	RI	02871	Portsmouth	RI	02871		
Director Name			Director Name				
Marybeth Pike			Walter Gray				
Street Address			Street Address				
88 Eustis Avenue			225 East Main Road				
City	State	Zip	City	State	Zip		
Newport	RI	02840	Portsmouth	RI	02871		
9. REGISTERED AGENT IN	RHODE ISLAND	多种的现在分词					
This information is currently of	of record in the Offic	e of the Secretary of State	. Changes require filing of Form	m 641 - R.I.G.L. 7-6-13/7	-6-78		
This report must	be signed by either	the President, Vice Pres	ident, Secretary, Assistant Sec	cretary, Treasurer, Receiv	er or Trustee		

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Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all ents contained herein are true and correct. Print or Type Name of Officer Title of Officer Form 631 Rev. 09/17