

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 201 401.2 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.

permity year by \$25.00.						
1. Corporate ID No. 30068 Rhole Island FFA Foundation IV. 3. State of Incorporation 4. Corporate address in Rhode Island - Street Address City Zip						
3. State of Incorporation	4. Corborate address in R	bode Island - Street Address	(CH) [M 27: C	City	Zin	
RI	University	of Rhode I	s/And	KIN95ton	02881	
5. Foreign corporation. Enter prin	cipal office address		City	State	Zip	
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island						
Educational/Firmwin Support for Students of Agriculture Education in Secondary schools						
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) [FILL IN SPACES BEFORE USING ATTACHMENTS						
President Name			Vice President Name			
Gugare Millar			Norman HAMMON!			
Street Address 32 Hells date Rd City West Kingston State RI 02692			Street Address 25 Old Hartford Pike City N-Scitvate State RE Zip 02657 Treasurer Name			
City	State	Zip 17.6.62	City	State	02f51	
West Kingston	K1	7ip 028 92	N- Scitvate	RE	02859	
Screenary Name Anthony MAIII/U Street Address 65 Wilde Field Dr City WARWILL RI D2889			Treasurer Name TAMES OWEN			
Street Address			Street # Iduara			
65 Vilde Field Dr			10 David Dr. City State RF Zip 02919			
WARWICK	State R_L	1)28 f 9	Johnston	State RF	Zip 02919	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS						
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23						
Director Name			Director Name Erin Liese Street Address 522 FArdner Rd City WesT Knyston Proceeder Name O2192			
Street Address			Street Address			
Street Address 75 borden are City Johnston State RE Zip 02919			522 FARdner Rd			
Johnstm.	State R I	2ip 02919	West Kusston	State RI	0219Z	
DANA MILLAN			Director Name			
32 Hills date Rd			Street Address			
City Wes T Kingston	State RI	Zip 8 2 8 9 2	City	State	Zip	
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 report must be signed by either the President Vice President Secretary Assistant Secretary Traceuran Bessings Traceuran						

This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

FILED	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	Signature of Officer Mallo Signature of Officer Mallo Mallo
By: FOR SECRETARY OF STATE USE ONLY	Print or Type Name of Officer Secretary Title of Officer