



**State of Rhode Island and Providence Plantations
Office of the Secretary of State**

Fee: \$20.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Non-Profit Corporation
Annual Report**

Filing Period: June 1 - June 30

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.

ANNUAL REPORT YEAR: 2011

1. Corporate ID No. 000503452

2. Name of Corporation Kiwanis Club of North Smithfield Charitable Foundation

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 90 SCHOOL STREET
PO BOX 669

City or Town: FORESTDALE State: RI Zip: 02824 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

TO SOLICIT, COLLECT AND OTHERWISE RAISE MONEY TO PROVIDE CHARITABLE ASSISTANCE TO RESIDENTS OF NORTH SMITHFIELD RHODE ISLAND IN PURSUIT OF EDUCATIONAL, RELIGIOUS OR AMATEUR ATHLETIC ENDEAVORS

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	GARY F NARODOWY	66 GREENE STREET SLATERSVILLE, RI 02876 USA
TREASURER	H ANTHONY DELLER	10 RAILROAD, UNIT 77S SLATERSVILLE, RI 02876 USA
SECRETARY	SUZANNE B BERNIER	7 LAPRE ROAD NORTH SMITHFIELD, RI 02896 USA
VICE PRESIDENT	RONALD F MORIN	3 OBELINE DRIVE NORTH SMITHFIELD, RI 02896 USA
DIRECTOR	GARY F NARODOWY	66 GREENE STREET SLATERSVILLE, RI 02876 USA
DIRECTOR	RONALD F MORIN	3 OBELINE DRIVE NORTH SMITHFIELD, RI 02896 USA
DIRECTOR	SUZANNE B BERNIER	7 LAPRE ROAD NORTH SMITHFIELD, RI 02896 USA
DIRECTOR	H ANTHONY DELLER	10 RAILROAD ST, UNIT 77S SLATERSVILLE, RI 02876 USA

8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

H. ANTHONY DELLER, CPA 10 RAILROAD STREET UNIT 77S SLATERSVILLE , RI 02876

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

Signed this 28 Day of June, 2011 at 9:10:33 AM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By H ANTHONY DELLER

Signature of Officer of the Corporation

☐ President or ☐ Vice President or ☐ Secretary or ☐ Assistant Secretary or

☒ Treasurer or ☐ Receiver or ☐ Trustee (check one)

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in Section 7.

Form No. 631
Revised 09/07