

A. Ralph Mollis, Secretary of State

Corporations Division
148 W. River Street
Providence, RI 02904-2615

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR <u>2011</u>

RI 02904-2615 401.222.3040

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>		<u> </u>	•	* · · · <b>· y</b> · · · · · · ·	
1. Corporate ID No.	2. Name of Corporation	~	- 7 1			
94548	Friends	of Court	y music			
3 State of Incorporation	1	Rbode Island - Street Addre	U	City	Zip	
R.I.	20 Park	ST APT.	149	Johnston	02919	
5. Foreign corporation. Enter J			Cit)	State	Zip	
6. Brief Description of the charac						
To Foote	and Preser	ve the art	of country	+ Music		
				, ACES BEFORE USING ATTA	CHMENTS	
President Name			Vice President Manua			
Robert S. De m rample			michael De Morarvelle			
Street Address			Street Address 0 - 10			
20 Park	91 apt	149	26 Cath	erine Wrigh	+ court	
City A	State T	Zip	City	col State I.	Zip 0 1 7 17	
Sagurday Alaman	R.I.	02919	West Areen	and R. I.	02011	
Secretary Name			Treusurer Name Kvert & De morangelle			
Street Address						
7/ Floto	her ave.		20 Par	R ST- ags	7149	
City	State	Zip	Cita		770 - 10	
craiston	IRI.	08910	Johnston	State II.	Zip 02919	
8. NAMES AND ADDRESS	SES OF THE DIRECTO		ACHMENT) TILL IN SP.	I ACES BEFORE USING ATTA	ACHMENTS	
THE NUMBER OF DIREC	CTORS OF A DOMEST			NOT BE LESS THAN THR		
Director Name	_	ì	Director Name		<u> </u>	
Frances STygles			James Horton			
Commerce Andreadornes			Street Address	Street Address		
76 Frekel	er are.		99 Vers	ailles ST.		
City X	State	Zip	City	State 7	Zip	
landlor	IRI.	02910	Canslon	K L	02920	
Denie Horton			Director Name			
***************************************						
99 Versailles 57			Street Address			
Cilv		T	City		ω	
Cranston	R.I.	2ip 02920	City	Skite	ziþ-)	
9. REGISTERED AGENT	1 '	1 . , ,	•	1	=	
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This information is current	ly of record in the Offic	ce of the Secretary of St	ate. Changes require filing	of Form 641 - R.I.G.L. 7-6-13	3/7-6-78	
This report m	ust be signed by either	the President Vice Pr	ecident Secretary Assist	ant Secretary, Treasurer, Rec	<u> </u>	
ma report in	dat be aighed by either	the frestdent, vice ri	esidem, secretary, Assist	am secretary, freasurer, kec	ceiver or Trustee	
		FILED				
		JUN 3 0 2011				
		3014 0 0 2011	$\sim$			
	Ву	14711	Under penalty	of perjury, I declare and affirm	that I have examined this	
			report, includin	g any accompanying schedules	and statements, and that all	
			statements cont	ained herein are true and correct	t.	
File Date			Rutt	1. De Morans	elle 6-30-	
			Signature of Offi	1. De Morans cer s. De MORANVIII	Date	
Check No.		-	Ashort.	a DOMORANVIII	e	
			Print or Type No	ume of Officer		
By:		-   1				
FOR SECRETARY O	F STATE USE ONLY	1	PRESIL	) th 1	W	
1		1	Title of Officer			