

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 2011

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 Con	poration					
548233	KRISTEN N	KRISTEN M. ETTENSOHN SCHOLARSHIP FUND					
3. State of Incorporation	4. Corporate ad	4. Corporate address in Rhode Island - Street Address			Zip		
RHODE ISLAND	73 BEECH	WOOD AVENUE		PAWTUCKET	02860		
5. Foreign corporation. Enter principal office address			Cit _i '	State	Zip		
							
6. Brief Description of the charac		•					
TO CREATE A SCHOLA	RSHIP FUND V	VHICH WILL PROVIDE	SUPPORT FOR DESERVING	S STUDENTS ENTERING	COLLEGE.		
7. NAMES AND ADDRESS	SES OF THE OF	FICERS: ("X" ROX FOR A	TTACHMENT) FILL IN SPACE	TES REFORE HISING ATTAC	LIMENTS		
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATT) President Name			Vice President Name				
LINDA R HASSAN-ETTENSOHN			DAVID B ETTENSOHN				
Street Address			Street Address				
73 BEECHWOOD AVENUE			73 BEECHWOOD AVENUE				
City	State	Zip	City	State	Zip		
PAWTUCKET	RI	02860	PAWTUCKET	RI	02860		
Secretary Name			Treasurer Name				
DEREK ETTENSOHN			GINA M DEVECCHIS				
Street Address	· NII II		Street Address				
73 BEECHWOOD AVENUE				117 METRO CENTER BLVD			
City DANATHONET	State	Ζψ 20000	City	State	Zip		
PAWTUCKET	RI	02860	WARWICK	RI	02886		
			ATTACHMENT) TILL IN SPAC				
Director Name			D) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23 Director Name				
DAVID B ETTENSOHN			1 · · · · · · · · · · ·				
Street Address			LINDA R HASSAN-ETTENSOHN Street Address				
73 BEECHWOOD AVENUE			73 BEECHWOOD AVENUE				
City	State	Zip	Cin:	State	Zip		
PAWTUCKET	RI	02860	PAWTUCKET	RI	02860		
Director Name			Director Name		10200		
PAUL W RYAN, JR			NONE				
Street Address			Street Address				
333 WILLIAMS STREET 2L			NONE				
City	State	Zip	City	State	Zip		
PROVIDENCE	RI	02906	INONE	NONE	NONE		
9. REGISTERED AGENT II	N RHODE ISLAN	ND					
This information is currently	y of record in the	Office of the Secretary of	of State. Changes require filing of	f Form 641 - R.I.G.L. 7-6-13/	7-6-78		
TU:							

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

	5	48233 FILFD			
File Date Check No.	- Č	JUL 07 2011			
By:	RY_	8400			
FOR SECRETARY OF STATE USE ONLY					

Under penalty of perjury. I declare and affirm that report, including any accompanying schedules and s	
statements contained herein are trive and correct.	E Hours
Signature of Officer	Date 6 1/0/
Print or Type Name of Officer	1 1/1
Title of Officer	