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STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

2012

Filing Period: June 1 - June 30 - This report must be typed or printed legibly.

Filing Fee: \$20.00 - FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 26687		2. Exact name of the Corporation NEAT FOUNDATION, INC.			
3. State of Incorporation RI		4. Corporate Address in RI - Street Address 750 East Ave		City Pawtucket	Zip 02860
5. Foreign corporation. Enter principal office address			City	State	Zip
6. Brief description of the character of business conducted in Rhode Island Education					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐					
President Name Thomas W. Pearlman			Vice-President Name Roger M. Pearlman		
Street Address 110 Lincoln Ave.			Street Address 23205 Marigold Ave		
City Providence	State RI	Zip 02906	City Tehachapi	State CA	Zip 93561
Secretary Name Roger M. Pearlman			Treasurer Name Roger M. Pearlman		
Street Address 23205 Marigold Ave.			Street Address 23205 Marigold Ave		
City Tehachapi	State CA	Zip 93561	City Tehachapi	State CA	Zip 93561
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) ☐					
Director Name Roger M. Pearlman			Director Name Thomas W Pearlman		
Street Address 23205 Marigold Ave			Street Address 110 Lincoln Ave		
City Tehachapi	State CA	Zip 93561	City Providence	State RI	Zip 02906
Director Name Charle M. Smith III			Director Name		
Street Address 111 Blackstone Blvd			Street Address		
City Providence	State RI	Zip 02906	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 Form 641.					

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

File Date _____

Check No _____

By: _____

FOR SECRETARY OF STATE USE ONLY

Form No. 631
Revised: 01/2012

FILED 1051

MAY 16 2012

BY 170616

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Roger M Pearlman May 12 12
Signature of Officer Date

Roger M Pearlman
Print or Type Name of Officer

SECRETARY
Title of Officer