



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

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 2012

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. 8049		2. Name of Corporation Mustard Seed Foundation, Inc.			
3. State of Incorporation Rhode Island		4. Corporate address in Rhode Island - Street Address 1000 Chapel View Boulevard, Suite 220		City Cranston	Zip 02920
5. Foreign corporation. Enter principal office address		City		State	Zip
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island MAKES DONATIONS TO CHARITABLE ORGANIZATIONS					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Carol L. Russell			Vice President Name Robert J. Russell II		
Street Address PO Box 3330			Street Address PO Box 3330		
City Westport	State MA	Zip 02790	City Westport	State MA	Zip 02790
Secretary Name NONE			Treasurer Name NONE		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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 Robert J. Russell II			Director Name Benjamin G. Paster		
Street Address PO Box 3330			Street Address 1000 Chapel View Boulevard, Suite 220		
City Westport	State MA	Zip 02790	City Cranston	State RI	Zip 02920
Director Name Rev. Thomas L. Crum			Director Name		
Street Address 111 High Street			Street Address		
City Taunton	State MA	Zip 02718	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, Treasurer, Receiver or Trustee

FILED

MAY 30 2012

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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.

Signature of Officer

Date

Robert J. Russell II

Print or Type Name of Officer

Vice President

Title of Officer

File Date
Check No.
By
FOR SECRETARY OF STATE USE ONLY