



**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: 2012

1. Corporate ID No. 000068140

2. Name of Corporation J. HAROLD MONROE, JR. SCHOLARSHIP FUND

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 395 MENDON ROAD 2E

City or Town: NORTH SMITHFIELD

State: RI Zip: 02896 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

PROVIDING SCHOLARSHIP AWARDS TO SELECTED GRADUATING STUDENTS FROM THE NO. SMITHFIELD JR/SR HIGH SCHOOL.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	CRAIG C. MONROE	395 MENDON RD. APT. 2E NORTH SMITHFIELD, RI 02896 USA
SECRETARY	BRADFORD A. MONROE	93 IRONSTONE STREET MILLVILLE, MA 01529 USA
DIRECTOR	CLAIRE CAHILL	P.O. BOX 263 SLATERSVILLE, MA 02876
DIRECTOR	THOMAS MUNDY	24 HOMECREST AVE. SLATERSVILLE, RI 02876 USA
DIRECTOR	KATHLEEN LECLERC	27 TOM LEE DRIVE NORTH SMITHFIELD, RI 02896 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**

CRAIG MONROE 395 MENDON ROAD 2E NORTH SMITHFIELD , RI 02896

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

Signed this 8 Day of June, 2012 at 10:08:52 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 CRAIG C. MONROE

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

© 2007 - 2012 State of Rhode Island and Providence Plantations
All Rights Reserved