



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/business

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.

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|--|--------------------|--|-------------------------------|---------------------|---------------------|
| 1. Entity ID No. 000044257 | | 2. Exact name of the Corporation Verdandi Cultural Foundation Incorporated | | | |
| 3. State of Incorporation Rhode Island | | 4. Brief description of the character of business conducted in Rhode Island A domestic non-profit corporation that perpetuates Scandinavian Culture. | | | |
| 5. Principal office address 350 Kenyon Ave. | | City East Greenwich | State RI | Zip 02818 | |
| 6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> | | | | | |
| President Name Lee-Ann L. A. Hurtubise | | Vice-President Name Harold Greiner | | | |
| Street Address 350 Kenyon Ave. | | Street Address 27 Cedar Pond Dr. - Apt. 2 | | | |
| City East Greenwich | State RI | Zip 02818 | City Warwick | State RI | Zip 02886 |
| Secretary Name Alice Myrberg | | Treasurer Name Carl Hurtubise | | | |
| Street Address 47 Richmond St. | | Street Address 350 Kenyon Ave. | | | |
| City Barrington | State RI | Zip 02806 | City East Greenwich | State RI | Zip 02818 |
| 7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> | | | | | |
| Director Name Philip Lundgren | | Director Name Carl Eliason | | | |
| Street Address 160 Alexander St. | | Street Address 58 Packard Ave. | | | |
| City Cranston | State RI | Zip 02910 | City Warwick | State RI | Zip 02886 |
| Director Name Astrid S. Drew | | Director Name | | | |
| Street Address 47 Nelson St. | | Street Address | | | |
| City Cranston | State RI | Zip 02910 | City | State | Zip |
| 8. 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

FILED

File Date _____

Check No _____

By: _____

FOR SECRETARY OF STATE USE ONLY

JUN 28 2012

BY *[Signature]*
 29-173868

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.

Carl A. Hurtubise 6/28/2012
 Signature of Officer Date

Carl Hurtubise
 Print or Type Name of Officer
Treasurer
 Title of Officer