



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. 148346		2. Exact name of the Corporation Maharishi Foundation USA, Inc.			
3. State of Incorporation Massachusetts		4. Corporate Address in RI - Street Address		City	Zip
5. Foreign corporation. Enter principal office address 679 George Hill Road		City Lancaster		State MA	Zip 01523
6. Brief description of the character of business conducted in Rhode Island Teaching Transcendental Meditation					
7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☒					
President Name Dr. Bevan Morris			Vice-President Name Robert Daniels		
Street Address 1000 North 4th Street			Street Address 1734 Jasmine Avenue		
City Fairfield	State IA	Zip 52557	City Fairfield	State IA	Zip 52556
Secretary Name Leonard Goldman			Treasurer Name Benjamin Feldman		
Street Address 178 Delaware Avenue			Street Address Station 24, NP6063, Vlodrop, The Netherlands		
City Freeport	State NY	Zip 11520	City	State	Zip
8. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) ☐					
Director Name Dr bevan Morris			Director Name Benjamin Fledman		
Street Address 1000 North 4th Street			Street Address Station 24, NP6063, Vlodrop, The Netherlands		
City Fairfield	State IA	Zip 52557	City	State	Zip
Director Name Dr. John Hagelin			Director Name		
Street Address 1950 Mansion Drive			Street Address		
City Fairfield	State IA	Zip 52556	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

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.

Robert Cohn
Signature of Officer

5/26/2012
Date

Robert Cohn

Print or Type Name of Officer

Assistant Secretary

Title of Officer

FILED

JUN 29 2012

BY 1474

Non-Profit Corporation Annual Report 2012

Entity # 148346.

Maharishi Foundation USA, Inc.

7. Name and address of Officers Attachment

Robert Alan Cohn

Assistant Secretary

1961 Sunrise Avenue

Fairfield, IA 52556

FILED

JUN 29 2012

BY FD 148346