



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.

1. Entity ID No. 130318		2. Exact name of the Corporation Point Judith Fishermens Memorial Foundation			
3. State of Incorporation RHODE ISLAND		4. Brief description of the character of business conducted in Rhode Island To build a memorial to fisherman lost at sea.			
5. Principal office address 28 Caswell Street		City Narragansett	State RI	Zip 02882	
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
President Name Michael Marchetti			Vice-President Name Steve Follett		
Street Address 3119 Post Road			Street Address 145 Thoreau Lane		
City Wakefield	State RI	Zip 02879	City Wakefield	State RI	Zip 02879
Secretary Name Donna Follett			Treasurer Name Rodman Sykes		
Street Address 145 Thoreau Lane			Street Address Ministerial Road		
City Wakefield	State RI	Zip 02879	City Wakefield	State RI	Zip 02879
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
Director Name Carl Granquist			Director Name Donna Follett		
Street Address 37 Sunset Avenue			Street Address 145 Thoreau Lane		
City Wakefield	State RI	Zip 02879	City Wakefield	State RI	Zip 02879
Director Name Steve Follett			Director Name Connie Loftes		
Street Address 145 Thoreau Lane			Street Address 895 Post Road		
City Wakefield	State RI	Zip 02879	City Wakefield	State RI	Zip 02879
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

File Date _____
 Check No _____
 By: _____
FOR SECRETARY OF STATE USE ONLY

FILED

JUL 27 2012

821

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.

Michael Marchetti, 2012
 Signature of Officer. Date

Michael Marchetti
 Print or Type Name of Officer

President

Title of Officer

From:

07/27/2012 10:11

#923 P. 002/002

Point Judith Fishermens Memorial Foundation - Corporate ID# 130318

2012 Annual Report

6. Additional Officers - 2012

Assistant Treasurer Michael Marchetti
 3119 Post Road
 Wakefield, RI 02879

7. Board of Directors - additional members - 2012

Rodman Sykes
Ministerial Road
Wakefield, RI 02879

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