

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. 000516278

2. Name of Corporation Athena's Cup, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: <u>640 WINTER STREET</u>

City or Town: WOONSOCKET State: RI Zip: 02895 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

THE DEVELOPMENT, MARKETING AND MANAGEMENT OF BREAST CANCER
AWARENESS ACTIVITIES AND FUND-RAISING FOR BREAST CANCER RESEARCH AND
TO CARRY ON ANY OTHER ACTIVITY THAT MAY BE LAWFULLY CARRIED ON BY A
CORPORATION FORMED UNDER THE RHODE ISLAND NON-PROFIT CORPORATION
ACT AS MAY BE AMENDED FROM TIME TO TIME.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country	
PRESIDENT	JENNIFER JOLICOEUR	640 WINTER STREET	

11	1	WOONSOCKET, RI 02895 USA			
DIRECTOR	AUDREY LAMBERT	640 WINTER STREET WOONSOCKET, RI 02895 USA			
DIRECTOR	JENNIFER JOLICOEUR	640 WINTER STREET WOONSOCKET, RI 02895 USA			
DIRECTOR	ROBYN JOLICOEUR	640 WINTER STREET WOONSOCKET, RI 02895 USA			
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78 JEFFREY B. CIANCIOLO, ESQ. 55 DORRANCE STREET, SUITE 200 PROVIDENCE, RI 02903 9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver, or Trustee.					
Signed this 9 Day of November, 2012 at 2:04:32 PM. 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 JENNIFER JOLICOEUR
Signature of Officer of the Corporation

X President or	Vice President or	Secretary or	Assistant Secretary or
Treasurer or	Receiver or T	rustee (check one	e)

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

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