



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 2013

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. 26735		2. Exact name of the Corporation THE HUSENIG FOUNDATION, INC.	
3. State of Incorporation R.I.		4. Brief description of the character of business conducted in Rhode Island SOCIAL, EDUCATIONAL, CULTURAL	
5. Principal office address 80 Whitewood Dr.		City Cranston	State R.I. Zip 02920
. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
President Name MARC S. JANIGIAN		Vice-President Name SHIRLEY KEZIRIAN	
Street Address 28 Firethorn Lane		Street Address 275 Blackstone Blvd.	
City Cranston	State R.I.	Zip 02920	City Cranston State R.I. Zip 02908
Secretary Name Marianne Janigian		Treasurer Name Louise Janigian	
Street Address 131 Applegate Rd.		Street Address 80 Whitewood Dr.	
City Cranston	State R.I.	Zip 02920	City Cranston State R.I. Zip 02920
. 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 Harry DerAnanian		Director Name Stephen Masoian	
Street Address 101 Rankin Ave.		Street Address 108 Whitewood Dr.	
City Providence	State R.I.	Zip 02908	City Cranston State R.I. Zip 02920
Director Name Wayne Kezirian		Director Name John P. Medeiros	
Street Address 1157 Narragansett Blvd.		Street Address 169 Sheffield Hill Rd.	
City Providence	State R.I.	Zip 02905	City Exeter State R.I. Zip 02822
. 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

MAY 09 2013

By Marc S. Janigian
CR # 1283

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.

Marc S. Janigian 5-6-13
 Signature of Officer Date

Marc S. Janigian
 Print or Type Name of Officer

President
 Title of Officer