



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: 2013

1. Corporate ID No. 000675518

2. Name of Corporation The Camden A. Fry Memorial Fund

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 13 REYNOLDS PLAT

City or Town: CHEPACHET

State: RI

Zip: 02814

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

THIS CORPORATION IS ORGANIZED EXCLUSIVELY FOR CHARITABLE PURPOSES. TO THIS END, THE CORPORATION SHALL AT ALL TIMES BE OPERATED EXCLUSIVELY FOR CHARITABLE PURPOSES WITHIN THE MEANING OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE OF 1986, AS NOW ENACTED OR HEREAFTER AMENDED, INCLUDING, FOR SUCH PURPOSES, THE MAKING OF DISTRIBUTIONS TO ORGANIZATIONS THAT QUALIFY AS EXEMPT ORGANIZATIONS UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE OF 1986, AS NOW ENACTED OR HEREAFTER AMENDED. ALL FUNDS, WHETHER INCOME OR PRINCIPAL, AND WHETHER ACQUIRED BY GIFT OR CONTRIBUTION OR OTHERWISE, SHALL BE DEVOTED TO SAID PURPOSES.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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 First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	TIMOTHY FRY	13 REYNOLDS PLAT CHEPACHET, RI 02814 USA
TREASURER	ELIZABETH BELRAM	65 CHOPMIST HILL ROAD CHEPACHET , RI 02814 USA
SECRETARY	LURIE DURFEE	555 PUTNAM PIKE GREENVILLE, RI 02828 USA
VICE PRESIDENT	ANNETTE ROSE	3 ABBEY LANE FOSTER, RI 02825 USA
DIRECTOR	TIMOTHY DEXTER FRY	13 REYNOLDS PLAT CHEPACHET, RI 02814 USA
DIRECTOR	ANNETTE CECILE ROSE	3 ABBEY LANE FOSTER , RI 02825 USA
DIRECTOR	CAROLE ANNE FRY	13 REYNOLDS PLAT CHEPACHET, RI 02814 USA

8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

TIMOTHY FRY 13 REYNOLDS PLAT CHEPACHET , RI 02814

9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver, or Trustee.

Signed this 29 Day of July, 2013 at 9:51:36 AM. 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 TIMOTHY D FRY
Signature of Officer of the Corporation

President or Vice President or Secretary or Assistant Secretary or
 Treasurer or Receiver or Trustee (check one)

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