

## 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 2014

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.	2. Exact na	me of the Corporation						
61552	Bafflin F	Bafflin Foundation						
3. State of Incorporation	4. Brief des	cription of the characte	er of business conducted in Rhode	sland				
Rhode Island	Accept	charitable donati	ons to invest such donation	ons.				
. Principal office address c/o 50 Kennedy Plaza, Suite 1500			City Providence	State RI	Zip <b>02903</b>			
6. LIST ALL OFFICERS	-	?ESSES) ("X" ROX F						
President Name			Vice-President Name		21 SAMERICA CIRCUITA DE CARRO DE LA PROPERCIONA EN LA PARA DE CARRO DE CARR	itiniti ininanii		
Michael M. Edwards			Paul A. Silver					
Street Address			Street Address					
40 Ridgewood Road			50 Kennedy Plaza, Suite 1500					
City	State	Zip	City	State	Zip			
Attleboro	MA	02703	Providence	RI	02903			
Secretary Name	Secretary Name			Treasurer Name				
Joachim A. Weissfeld			Paul A. Silver					
Street Address			Street Address					
50 Kennedy Plaza, Suite 1500			50 Kennedy Plaza, Suite 1500					
City	State	Zip	City	State	Zip			
Providence	RI	02903	Providence	RI	02903			
7. LIST <u>ALL</u> DIRECTOR ("X" BOX FOR ATTAC		ORESSES). RHODE IS	SLAND CORPORATIONS <u>MUST</u> I	LIST NO LESS THAN	I THREE (3) DIREC	TORS		
Director Name			Director Name					
Michael M. Edwards			Paul A. Silver					
Street Address			Street Address					
40 Ridgewood Roa			50 Kennedy Plaza, S		T			
City	State	Zip	City	State	Zip 0290≩	<u>~</u> 4:		
Attleboro	MA	02703	Providence	RI	02904			
Director Name Joachim A. Weissf	ماط		Director Name					
	eiu		Oten at Address a		<b>—</b>			
Street Address 50 Kennedy Plaza, Suite 1500			Street Address					
		7ia		State				
City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>	City	State	Zip 🔁	25°		
			en e			(1) (1)		
3. REGISTERED AGENT						<u> </u>		
This information is access	andly of socoed in 44	- Office of the Court	ary of State. Changes require fili	na Carm 641	<u>ယ</u> .	-		

File Date	FILED	Under penalty of perjury, I declare and affirm that I ha this report, including any accompanying schedules a and that all statements contained herein are true and		
Check No J	UN 06 2014	Signature of Officer	6/5/14 Date	
FOR SECRETARY OF STATE USE ONLY	A	Print or Type Name of Officer		
orm No. 631 levised: 05/2012		Vice President and Treasurer Title of Officer		

Revised: 05/2012