



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

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. 794495		2. Exact name of the Corporation Middletown High School Alumni Association, Rhode Island			
3. State of Incorporation Rhode Island		4. Brief description of the character of business conducted in Rhode Island Non-profit alumni association; provides scholarships and grant money to the students graduating Middletown public high school.			
5. Principal office address 130 Valley Road		City Middletown		State RI	Zip 02842
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name John H. Thompson, Jr.		Vice-President Name Marilyn Hennessey			
Street Address 189 Hampton Way		Street Address 408 Mitchells Lane			
City Wakefield	State RI	Zip 02879	City Middletown	State RI	Zip 02842
Secretary Name Karen Dill		Treasurer Name Thomas A. Heaney, Jr.			
Street Address 141 Busher Drive		Street Address 485 Aquidneck Ave			
City Middletown	State RI	Zip 02842	City Middletown	State RI	Zip 02842
7. 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 John H. Thompson, Jr.		Director Name Marilyn Hennessey			
Street Address 189 Hampton Way		Street Address 408 Mitchells Lane			
City Wakefield	State RI	Zip 02879	City Middletown	State RI	Zip 02842
Director Name Karen Dill		Director Name Thomas A. Heaney, Jr.			
Street Address 141 Busher Drive		Street Address 485 Aquidneck Ave			
City Middletown	State RI	Zip 02842	City Middletown	State RI	Zip 02842
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, duly Authorized Representative, Receiver or Trustee

File Date _____

Check No _____

By: _____

FOR SECRETARY OF STATE USE ONLY

FILED

JUN 12 2014

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.

Thomas A. Heaney, Jr. 10 Jun 14
Signature of Officer or Authorized Representative Date

Thomas A. Heaney, Jr.

Print or Type Name of Officer or Authorized Representative