



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: 2014

1. Corporate ID No. 000114868

2. Name of Corporation Scituate Dollars for Scholars

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 94 TRIMTOWN ROAD

City or Town: NORTH SCITUATE

State: RI

Zip: 02857

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

RAISE MONEY FOR SCHOLARSHIPS FOR GRADUATING HIGH SCHOOL SENIORS
RESIDING IN SCITUATE, RI.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
TREASURER	LOLA SMITH	117 ELMDALE RD. NO. SCITUATE, RI 02857 US
SECRETARY	MARGARET M WATKINSON	287 CENTRAL PIKE NO. SCITUATE, RI 02857 US

PRESIDENT	WILLIAM LENOX	163 FRANKLIN ROAD FOSTER, RI 02825- USA
DIRECTOR	DONNA THOMSEN	46 SUDDARD LANE NORTH SCITUATE, RI 02857
VICE PRESIDENT	NANCY FRASER	9 SUDDARD LN. NORTH SCITUATE, RI 02857 USA
DIRECTOR	KATHLEEN BLAINE	264 ROCKLAND RD. NO. SCITUATE, RI 02857 US
DIRECTOR	PHYLLIS SCHUMACHER	8 COLLINS LN. NO. SCITUATE , RI 02857 US

**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**

WILLIAM LENOX 94 TRIMTOWN ROAD NORTH SCITUATE , RI 02857-

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

Signed this 21 Day of June, 2014 at 1:37:54 PM by the authorized person. *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 company, 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 WILLIAM F. LENOX
Signature of Authorized Person

Form No. 631
Revised 09/07

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