



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. 000069109

2. Name of Corporation Rhode Island Future Problem Solving Program

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 67 B POTTERSVILLE ROAD

City or Town: LITTLE COMPTON

State: RI Zip: 02837 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

TO ASSIST STUDENTS TO DEVELOP CREATIVE THINKING SKILLS, LEARN ABOUT COMPLEX ISSUES, DEV. WRITTEN & VERBAL COMM. SKILLS.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
VICE PRESIDENT	ELEANOR P CASE	67 B POTTERSVILLE RD LITTLE COMPTON, RI 02837-1933 USA
PRESIDENT	HERBERT A CASE JR	67 B POTTERSVILLE RD. LITTLE COMPTON, RI 02837- USA

DIRECTOR	EMILY E UON	5239 NORTH MAIN STREET FALL RIVER , MA 02720 USA
DIRECTOR	ETHAN R CASE	71 WOOD ST MILTON, MA 02186 USA
DIRECTOR	JENNIFER Y CASE	71 WOOD ST MILTON, MA 02186 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**

HERBERT A. CASE, JR. 67 B POTTERSVILLE ROAD LITTLE COMPTON , RI 02837

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

Signed this 30 Day of June, 2014 at 5:55:56 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 ELEANOR P. CASE
Signature of Authorized Person

Form No. 631
Revised 09/07

© 2007 - 2014 State of Rhode Island and Providence Plantations
All Rights Reserved