



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. 000505651

2. Name of Corporation RICHARD G CROKE JR. MEMORIAL FOUNDATION

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 11 BOB WHITE TERRACE

City or Town: RICHMOND

State: RI Zip: 02898 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

SCHOLARSHIP

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	EMILY ANN CROKE	22 METROPOLITAN PARK DRIVE RIVERSIDE, RI 02915 USA
TREASURER	KEVIN P MCGUINNESS	16 LISA LANE BRISTOL, RI 02898 USA
SECRETARY	KATHLEEN L DOLLOFF	11 BOB WHITE TERRACE

		RICHMOND, RI 02898 USA
VICE PRESIDENT	RICHARD G CROKE SR	85 HAZELWOOD AVE EAST PROVIDENCE, RI 02914 USA
DIRECTOR	KEVIN CROKE	197 FENNER ST RIVERSIDE, RI 02915 USA
DIRECTOR	PATRICIA A MCGUINNESS	16 LISA LANE BRISTOL, RI 02809 USA
DIRECTOR	RAYMOND H DOLLOFF	11 BOB WHITE TERRACE RICHMOND, RI 02898 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**

KATHLEEN DELLOF 11 BOB WHITE TERRACE RICHMOND , RI 02898

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

Signed this 1 Day of July, 2014 at 9:37:56 AM 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 KATHLEEN L DOLLOFF
Signature of Authorized Person

Form No. 631
Revised 09/07

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