



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. 000128286

2. Name of Corporation The Langevin Foundation

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 231 RESERVOIR AVENUE

City or Town: PROVIDENCE

State: RI Zip: 02907 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

CHARITABLE AND EDUCATIONAL PURPOSES

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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

Table with 3 columns: Title, Individual Name, Address. Rows include President (James Langevin), Treasurer (Richard Nicholson), and Secretary (Henry Monti).

		PROVIDENCE, RI 02907 USA
SECRETARY	HENRY STEPHEN MONTI	231 RESERVOIR AVE. PROVIDENCE, RI 02907 USA
VICE PRESIDENT	JUNE LANGEVIN MS.	318 COLUMBIA AVE. WARWICK, RI 02888 USA
DIRECTOR	JUNE LANGEVIN	318 COLUMBIA AVE. WARWICK, RI 02888 USA
DIRECTOR	JAMES LANGEVIN	1270 IVES RD. WARWICK, RI 02818 USA
DIRECTOR	HENRY MONTI	231 RESERVOIR AVE. PROVIDENCE, RI 02907 USA
DIRECTOR	RICHARD NICHOLSON	931 JEFFERSON BLVD. WARWICK, RI 02888 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**

HENRY S. MONTI 231 RESERVOIR AVENUE PROVIDENCE , RI 02907

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

**Signed this 31 Day of December, 2014 at 4:38:26 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 HENRY S. MONTI  
Signature of Authorized Person

Form No. 631  
Revised 09/07