



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

Foreign Non-Profit  
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: 2015

1. Corporate ID No. 000929170

2. Name of Corporation DOLLAR LEARNING FOUNDATION, INC

3. State of Incorporation

State: FL

4. Corporate Address in Rhode Island

No. and Street: 222 JEFFERSON BOULEVARD

STE 200

City or Town: WARWICK

State: RI Zip: 02888 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 9038 HAYVENHURST AVE,

City or Town: NORTH HILLS State: CA Zip: 91343 Country: USA

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

TO PROVIDE AFFORDABLE BANKRUPTCY REQUIRED COURSES, CREDIT COUNSELING AND DEBTOR EDUCATION COURSE TO THE CITIZENS OF RHODE ISLAND

7. Names and Addresses of the Officers and Directors:

**All officers and directors must be listed.**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	ARAM POLAT	9038 HAYVENHURST AVE, NORTH HILLS, CA 91343 USA
SECRETARY	BEN WUNSCH	9038 HAYVENHURST AVE, NORTH HILLS, CA 91343 USA
VICE PRESIDENT	BEN WUNSCH	9038 HAYVENHURST AVE, NORTH HILLS, CA 91343 USA

DIRECTOR	ANI POLAT	9038 HAYVENHURST AVE, NORTH HILLS, CA 91343 USA
DIRECTOR	RICHARD MCGREGOR	9038 HAYVENHURST AVE, NORTH HILLS, CA 91343 USA
DIRECTOR	ALLAN ARELLANO	9038 HAYVENHURST AVE, NORTH HILLS, CA 91343 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**

CORPORATION SERVICE COMPANY 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI  
02888

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

**Signed this 13 Day of April, 2015 at 10:21:02 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 ARAM POLAT  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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