



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2015

Filing Period: June 1 - June 30 • This report must be typed or printed legibly.

Filing Fee: \$20.00 • FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. <u>959409</u>		2. Exact name of the Corporation <u>LEONARD E WALKER SR Golf Tournament</u>			
3. State of Incorporation <u>R.I.</u>		4. Brief description of the character of business conducted in Rhode Island <u>Scholarship Fund Raising</u>			
5. Principal office address <u>316 Ohio Ave</u>		City <u>Providence</u>	State <u>R.I.</u>	Zip <u>02905</u>	
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name <u>ELAYNE WALKER-CABRAL</u>		Vice-President Name <u>MARCELLINO CABRAL</u>			
Street Address <u>316 Ohio Ave</u>		Street Address <u>316 Ohio Ave</u>			
City <u>Providence</u>	State <u>RI</u>	Zip <u>02905</u>	City <u>Providence</u>	State <u>R.I.</u>	Zip <u>02905</u>
Secretary Name <u>SAME RENEE WALKER</u>		Treasurer Name <u>SAME</u>			
Street Address <u>29 CRASVENOR AVE</u>		Street Address <u></u>			
City <u>Providence</u>	State <u>RI</u>	Zip <u>02917</u>	City <u></u>	State <u></u>	Zip <u></u>
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name <u>FRANK R WALKER III</u>		Director Name <u>ARLINE WALKER</u>			
Street Address <u>69 Arnold Ave</u>		Street Address <u>112 SUTTON AVE</u>			
City <u>Cranston</u>	State <u>R.I.</u>	Zip <u>02905</u>	City <u>EAST Providence</u>	State <u>R.I.</u>	Zip <u>02914</u>
Director Name <u>WALTER MORGAN</u>		Director Name <u>DR. KENNETH R WALKER</u>			
Street Address <u>300 FRONT ST APT 511</u>		Street Address <u>399 BROWN ST</u>			
City <u>PAWUCKETT</u>	State <u>RI</u>	Zip <u>02860</u>	City <u>EAST Providence</u>	State <u>RI</u>	Zip <u>02914</u>
8. REGISTERED AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 641.					

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

File Date	
Check No	
By	
FOR SECRETARY OF STATE USE ONLY	

FILED

MAY 18 2015

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A.A.

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Marcellino Cabral 5-18-15
Signature of Officer or Authorized Representative Date

MARCELLINO CABRAL
Print or Type Name of Officer or Authorized Representative