



**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: 2015

1. Corporate ID No. 001019757

2. Name of Corporation Good Karma Charitable Foundation

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 15 JACQUELINE WAY

City or Town: TIVERTON

State: RI

Zip: 02878

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 EDUCATE PEOPLE ABOUT THE POSITIVE EFFECT OF ADAPTIVE SAILING AND PARALYMPIC COMPETITION

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	BRIAN SKEELS	15 JACQUELINE WAY TIVERTON, RI 02878 USA
DIRECTOR	SARAH SKEELS	15 JACQUELINE WAY TIVERTON, RI 02879 USA

DIRECTOR	CINDY WALKER	443 WOLCOTT AVENUE MIDDLETOWN, RI 02842 USA
DIRECTOR	DOUGLAS SHEAR	443 WOLCOTT AVENUE MIDDLETOWN, RI 02482 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**

BRIAN SKEELS 15 JACQUELINE WAY TIVERTON , RI 02879

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

Signed this 29 Day of June, 2015 at 1:35:51 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 BRIAN SKEELS
Signature of Authorized Person

Form No. 631
Revised 09/07

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