



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.** 000026305

**2. Name of Corporation** HERA, EDUCATIONAL FOUNDATION, INC.

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 10 HIGH STREET, STE 1B

City or Town: WAKEFIELD

State: RI Zip: 02879 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 PROMOTE CULTURAL, ARTISTIC AND EDUCATIONAL ACTIVITIES IN R.I.

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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	MARA TRACHTENBERG	134 ROBINSON STREET WAKEFIELD, RI 02879 USA
SECRETARY	ULI BRAMST	1774 SOUTH ROAD KINGSTON, RI 02881 USA
DIRECTOR	ALEXANDRA BROCHES	44 POND STREET

		WAKEFIELD, RI 02879 USA
DIRECTOR	BARBARA PAGH	1354 CURTIS CORNER ROAD WAKEFIELD, RI 02879 USA
DIRECTOR	DONNA GUSTAFSON	62 SWEET FERN LANE PEACE DALE, RI 02879 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**

ALEXANDRA BROCHES 327 MAIN STREET P.O. BOX 336 WAKEFIELD , 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 5 Day of July, 2015 at 12:57:35 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 MARA TRACHTENBERG  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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