



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. 000060833

2. Name of Corporation The Erikson Biographical Institute

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 550 SHERMANTOWN ROAD

City or Town: SAUNDERSTOWN

State: RI Zip: 02874 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

FOR CHARITABLE, EDUCATIONAL AND SCIENTIFIC PURPOSES WITHIN THE MEANING OF SECTION 501C3 OF THE IRS CODE OF 1986, AS AMENDED.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	MARY LOU UPHAM	550 SHERMANTOWN ROAD SAUNDERSTOWN, RI 02874 USA
TREASURER	KENNETH B UPHAM	550 SHERMANTOWN RD SAUNDERSTOWN, RI 02874 USA

SECRETARY	KENNETH B UPHAM	550 SHERMANTOWN RD SAUNDERSTOWN, RI 02874 USA
VICE PRESIDENT	KENNETH B UPHAM	550 SHERMANTOWN RD SAUNDERSTOWN, RI 02874 USA
DIRECTOR	WILLIAM LEWIS	82 CONSTITUTION AVE ATTLEBORO, MA 02703 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**

MARY LOU UPHAM 550 SHERMANTOWN ROAD SAUNDERSTOWN , RI 02874

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

Signed this 8 Day of February, 2016 at 1:50:50 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 MARY LOU UPHAM
Signature of Authorized Person

Form No. 631
Revised 09/07

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