



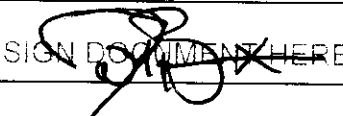
State of Rhode Island and Providence Plantations  
Department of State - Business Services Division

148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040 | Email: [corporations@sos.ri.gov](mailto:corporations@sos.ri.gov) | Website: [www.sos.ri.gov](http://www.sos.ri.gov)

**Non-Profit Corporation Annual Report for the year:** 2016

Filing period: June 1 - June 30

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

<b>1. Entity ID Number</b>		<b>2. Exact name of the Corporation</b>			
1521487		Audrain Automobile Museum, Inc.			
<b>3. State of Incorporation</b>		<b>4. Brief description of the character of business conducted in Rhode Island</b>			
Delaware		See attachment.			
<b>5. Principal Office Address</b>		City	State	Zip	
222 Bellevue Avenue		Newport	RI	02840	
<b>6. List ALL officers (names and addresses)</b> <span style="float: right;">Check the box to indicate an attachment <input checked="" type="checkbox"/></span>					
<b>President Name</b> See attachment.		<b>Vice-President Name</b>			
Street Address		Street Address			
City	State	Zip	City	State	Zip
<b>Secretary Name</b>		<b>Treasurer Name</b>			
Street Address		Street Address			
City	State	Zip	City	State	Zip
<b>7. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors.</b> <span style="float: right;">Check the box to indicate an attachment <input checked="" type="checkbox"/></span>					
<b>Director Name</b> See attachment.		<b>Director Name</b>			
Street Address		Street Address			
City	State	Zip	City	State	Zip
<b>Director Name</b>		<b>Director Name</b>			
Street Address		Street Address			
City	State	Zip	City	State	Zip
<b>8. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.</b>					
<b>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.</b>					
This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.					
<b>Name of Officer/Authorized Representative</b> John T. Boxer				<b>Date</b> 5/17/16	
<b>Signature of Officer/Authorized Representative</b> 					

**FILED**  
MAY 25 2016  
BY 10/25 DS

**Audrain Automobile Museum, Inc.**

**Non-Profit Corporation Annual Report for the year 2016**

**RI Entity ID Number: 1521487**

**4. Brief description of the character of business conducted in Rhode Island**

To conduct or assist in the conduct of charitable and educational activities to promote and advance the public's interest in, appreciation of and participation in car collection through creating and supporting a public museum dedicated to classic, collectible, and modern cars.

**6. List ALL officers (names and addresses)**

A. President: Nicholas S. Schorsch, 222 Bellevue Avenue, Newport, RI 02840

B. Treasurer: Nicholas S. Schorsch, 222 Bellevue Avenue, Newport, RI 02840

C. Secretary: John T. Boxer, 222 Bellevue Avenue, Newport, RI 02840

**7. List ALL directors (names and addresses)**

A. Nicholas S. Schorsch, 222 Bellevue Avenue, Newport, RI 02840

B. Shelley D. Schorsch, 222 Bellevue Avenue, Newport, RI 02840

C. David de Muzio, 222 Bellevue Avenue, Newport, RI 02840

D. William M. Kahane, 222 Bellevue Avenue, Newport, RI 02840

E. John T. Boxer, 222 Bellevue Avenue, Newport, RI 02840

**FILED**

**MAY 25 2016**

BY 10125 DS ED 1521487