



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: 2016

1. Corporate ID No. 000120005

2. Name of Corporation MYRON J. FRANCIS PARENT TEACHER ORGANIZATION

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 64 BOURNE AVENUE

City or Town: RUMFORD

State: RI Zip: 02916 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 PROVIDE SUPPORT FOR THE EDUCATIONAL AND RECREATIONAL NEEDS OF THE STUDENTS OF MYRON J. FRANCIS ELEMENTARY SCHOOL.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	NICOLE KUDARAUSKAS	66 GREENWOOD AVE RUMFORD, RI 02916 USA
TREASURER	SCOTT HAGGERTY	10 HILL COURT RUMFORD, RI 02916 USA

SECRETARY	CHRISTINE ROGERS	BRAYTON AVE RUMFORD, RI 02916 USA
DIRECTOR	CHRISTINE ROGERS	BRAYTON AVE RUMFORD, RI 02916 USA
DIRECTOR	LLOYDANNE LEDDY	64 BOURNE AVENUE RUMFORD, RI 02916 USA
DIRECTOR	NICOLE KUDARAUSKAS	66 GREENWOOD AVE RUMFORD, RI 02916 USA
DIRECTOR	SCOTT HAGGERTY	10 HILL COURT RUMFORD, RI 02916 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

NICOLE KUDARAUSKAS 64 BOURNE AVENUE RUMFORD , RI 02916

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

Signed this 12 Day of June, 2016 at 7:07:08 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 NICOLE KUDARAUSKAS
Signature of Authorized Person

Form No. 631
Revised 09/07