

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

Foreign Non-Profit 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. <u>000617998</u>

2. Name of Corporation Car Donation Foundation

3. State of Incorporation

State: MN

4. Corporate Address in Rhode Island

No. and Street: 450 VETERANS MEMORIAL PARKWAY,

SUITE 7A

City or Town: <u>EAST PROVIDENCE</u> State: RI Zip: <u>02914</u>Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 5775 WAYZATA BLVD, SUITE 700

City or Town: <u>ST LOUIS PARK</u> State: <u>MN</u> Zip: <u>55416</u> Country: <u>USA</u>

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

TO FACILITATE THE DONATION OF MOTOR VEHICLES AND OTHER PROPERTY TO CHARITABLE ORGANIZATIONS

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	LOREN DORSHOW	2805 ELLA LANE HOPKINS , MN 55305 USA
TREASURER	CRAIG SIIRO	4917 W. 93RD STREET MINNEAPOLIS, MN 55437 USA
DIRECTOR	MATT ROSENBERG	70 OREGON AVE SOUTH GOLDEN VALLEY, MN 55426 USA

DIRECTOR	ANNE SNOW	2486 EDGCUMBE RPAD SAINT PAUL, MN 55116 USA
DIRECTOR	CRAIG SIIRO	4917 W. 93RD STREET MINNEAPOLIS, MN 55437 USA
DIRECTOR	LOREN DORSHOW	2805 ELLA LANE HOPKINS, MN 55305 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

NATIONAL REGISTERED AGENTS, INC. 450 VETERANS MEMORIAL PARKWAY, SUITE 7A PROVIDENCE, RI 02914

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

Signed this 13 Day of June, 2016 at 5:42:29 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 LOREN DORSHOW

Signature of Authorized Person

Form No. 631 Revised 09/07

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