



**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. 000271432

2. Name of Corporation Johnston Educational Foundation

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 1 JASMINE LN

City or Town: JOHNSTON State: RI Zip: 02919 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 IMPROVE, PROMOTE, SPONSOR AND ENHANCE THE QUALITY OF THE EDUCATIONAL EXPERIENCE FOR PUBLIC SCHOOL STUDENTS AND THEIR SCHOOL COMMUNITIES WITHIN THE TOWN OF JOHNSTON, RI

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
TREASURER	RAYMOND A DOMAINGUE	1 JASMINE LN JOHNSTON, RI 02919 USA
SECRETARY	ELAINE CABRAL	8 GRANT ST

		JOHNSTON, RI 02919 USA
CHAIRMAN	RAYMOND A DOMAINGUE	1 JASMINE LANE JOHNSTON, RI 02919 USA
VICE CHAIRMAN	MICHAEL MURRAY	14 BARNES AVE JOHNSTON, RI 02919 USA
DIRECTOR	GLENN HASKINS	3 BARBARA COURT JOHNSTON, RI 02919 USA
DIRECTOR	PATRICIA HANNAGAN	55 ASHBY ST JOHNSTON, RI 02919 USA
DIRECTOR	DEB SPAUR	11 EAST PARK DR JOHNSTON, RI 02919 USA
DIRECTOR	GAIL PEREIRA	6 STONY ACRE DR JOHNSTON, RI 02919 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**

RAYMOND A. DOMAINGUE 1 JASMINE LN JOHNSTON , RI 02919

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

Signed this 17 Day of June, 2016 at 9:35:58 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 RAYMOND DOMAINGUE
Signature of Authorized Person

Form No. 631
Revised 09/07