



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.** 001297871

**2. Name of Corporation** The Jacob D. Hansen Memorial Fund

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: #24 SALT POND RD  
UNIT C4

City or Town: #WAKEFIELD State: RI Zip: 02879 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**

SUPPORTING CHILDREN WITH LIFE THREATENING ILLNESSES, THEIR FAMILIES AND THOSE LOCAL ORGANIZATIONS THAT SERVE THIS POPULATION

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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<br>First, Middle, Last, Suffix | Address<br>Address, City or Town, State, Zip Code, Country |
|--------------|------------------------------------------------|------------------------------------------------------------|
| INCORPORATOR | PAUL C. HANSEN                                 | 24 SALT POND ROAD, UNIT C4<br>WAKEFIELD, RI 02879 USA      |
| DIRECTOR     | STEVEN HANSEN                                  | 103 OSPREY ROAD                                            |

|          |                   |                                                        |
|----------|-------------------|--------------------------------------------------------|
|          |                   | WAKEFIELD, RI 02879 USA                                |
| DIRECTOR | ANN-MARIE MURPHY  | 205 SUNNYBROOK FARM ROAD<br>NARRAGANSETT, RI 02860 USA |
| DIRECTOR | SHANNON PICKERING | 36 ROSE COURT<br>CHARLESTOWN, RI 02813 USA             |
| DIRECTOR | JAMES HANSEN      | 21 EVAN WAY<br>KINGSTON, RI 02881 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**

PAUL C. HANSEN 24 SALT POND ROAD, UNIT C4 WAKEFIELD , RI 02879

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

**Signed this 28 Day of June, 2016 at 9:54:43 AM 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 PC HANSEN  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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