Annual Report for	the year: 201	6		_			
Corporation → Filing period: Janu → Filing Fee: \$50.00							
→ Penalty: Additional		n is not	filed by April 1.				
1. Entity ID Number	2. Exact nam	e of the	· Corporation				
9849	Memorial F	uneral	Home, Inc.				
3. Principal Office Address				City		State	Zip
375 Broadway				Newport		RI	02840
4. Business Phone Number				5. State of Incorporation			
401-846-0698				RI			
6. Brief description of the Funeral Service	character of busin	ess con	ducted in Rhode	e Island			
7. List ALL officers (name:	s and addresses)		·		C	heck the boy to in	dicate an attachment
President Name Robert S. Edenbach				Vice-President Name Kurt M. Edenbach			
Street Address 140 Cromwell Drive				Street Address PO Box 3403			
City Portsmouth	State RI		^{Zip} 02871	City Newpo		State RI	Zip 02840
Secretary Name Kurt M. Edenbach				Treasurer Name Christopher Edenbach			
Street Address PO Box 3403				Street Address 10 Fowler Ave			
City Newport	State RI	Zip	02840	City Newport		State RI	^{Zip} 02840
8. List ALL directors (name	es and addresses))		In . N		neck the box to inc	licate an attachment
Director Name				Director Nam	e		
Street Address				Street Addres	ss		
City	State	Zip		City		State	Zip
9. Shares Authorized			I40 Charantan				
S. Shares Authorized This information is currently of record in the			10. Shares Issued Number of shares Class/series Class/series Par				PAR VALUE
Department of State.			278		CNP		1.00
Changes require an additional filing.							
11. This report must be ex						e corporation is in	the hands of a receiver
or trustee, this report must Under penalty of perjury						, accompanying	schodulos and
statements, and that all	statements conta				nt, molaumy uny		schedules and
Name of Authorized Repre	esentative		1			Date	المار
Kurt Edenbach	, '21		//				17/16
Signature of Authorized Re	epresentative		Alr	-			•
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MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615 gv

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Phone: (401) 222-3040 Website: www.sos.ri.gov