



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: 2017

1. Corporate ID No. 000531973

2. Name of Corporation National Inventors Hall of Fame, Inc.

3. State of Incorporation

State: OH

ARTICLE III

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code

4. Corporate Address in Rhode Island

No. and Street: 450 VETERANS MEMORIAL HIGHWAY  
SUITE 7A

City or Town: EAST PROVIDENCE

State: RI Zip: 02914 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 3701 HIGHLAND PARK NW

City or Town: NORTH CANTON State: OH Zip: 44720 Country: USA

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

TO OPERATE AN AFTER SCHOOL PROGRAM AND WEEK-LONG SUMMER DAY CAMP  
FOR CHILDREN GRADES ONE THROUGH SIX

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

| <b>Title</b>        | <b>Individual Name</b><br>First, Middle, Last, Suffix | <b>Address</b><br>Address, City or Town, State, Zip Code, Country        |
|---------------------|---|--|
| TREASURER           | RHONDA L CAMPBELL                                     | 3701 HIGHLAND PARK NW<br>NORTH CANTON, OH 44720 USA                      |
| SECRETARY           | MAGGIE PETRUSH  | 3701 HIGHLAND PARK NW<br>NORTH CANTON, OH 44720 USA                      |
| CEO                 | MICHAEL J OISTER                                      | 3701 HIGHLAND PARK NW<br>NORTH CANTON, OH 44720 USA                      |
| DIRECTOR            | EDWARD W. GRAY  | ONE LAFAYETTE CTR 1120 20TH ST. NW STE 750-S<br>WASHINGTON, DC 20036 USA |
| ASSISTANT SECRETARY | JAMES KRAUS   | 3800 EMBASSY PARKWAY<br>AKRON, OH 44333 US                               |
| ASST. TREASURER     | STANLEY L APPLE                                       | 1540 W MARKET ST.<br>AKRON, OH 44313 US                                  |
| CHAIRMAN            | THOMAS WOLF   | 7456 W. 5TH AVE.,<br>LAKEWOOD, CO 80226 USA                              |
| DIRECTOR            | RAY LEACH   | 6701 CARNEGIE AVE. STE 100<br>CLEVELAND, OH 44103 USA                    |
| DIRECTOR            | JON WOOD  | 10 E. FIRESTONE BLVD.<br>AKRON, OH 44317 USA                             |
| OTHER OFFICER       | RHONDA CAMPBELL                                       | ,  |
| DIRECTOR            | JAMES E MALACKOWSKI                                   | 200 WEST MADISON<br>CHICAGO, IL 60606 USA                                |
| DIRECTOR            | GARY STERLING   | 2615 ROSSMOOR<br>UPPER ST.CLAIR, PA 15241 USA                            |
| DIRECTOR            | ROBERT BRIGGS   | 3800 EMBASSY PARKWAY SUITE 300<br>AKRON, OH 44333 USA                    |
| DIRECTOR            | JEAN BAILEY   | 2900 VAN NESS ST NW<br>WASHINGTON, DC 20008 USA                          |
| DIRECTOR            | JASEMINE C. CHAMBERS PHD                              | 1700 K ST. NW 5TH FLOOR<br>WASHINGTON, DC 20006 USA                      |
| DIRECTOR            | STEVEN SASSON   | 12 CAREFREE LANE<br>HILTON, NY 14466 USA                                 |
| DIRECTOR            | WAYNE SOBON   | 4250 22ND ST.<br>SAN FRANCISCO, OH 94114 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**

CT CORPORATION SYSTEM 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST  
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 20 Day of July, 2017 at 9:57:56 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 RHONDA CAMPBELL  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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