



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: **2018**

Non-Profit Corporation

- Filing period: June 1 - June 30
- Filing Fee: \$20.00
- Penalty: Additional \$25.00 fee if form is not filed by July 30.

RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV

2018 JUN -4 PM 2: 59

1. Entity ID Number 486996		2. Exact name of the Corporation Harvard Business School Association - SNE			
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island Provides educational and charitable opportunities particularly among graduates of Harvard Business School residing in the RI area.			
4 NAICS Code 813219 - Other Grantmaking					
6 Principal Office Address c/o 61 Cooke Street		City Providence		State RI	Zip 02906
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Thor Johnson			Vice-President Name none		
Street Address PO Box 148			Street Address		
City Saunderstown	State RI	Zip 02874	City	State	Zip
Secretary Name Dennis Stark			Treasurer Name Mary Daly		
Street Address 19 Kenilworth Way			Street Address 61 Cooke Street		
City Pawtucket	State RI	Zip 02860	City Providence	State RI	Zip 02906
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Thor Johnson			Director Name Dennis Stark		
Street Address PO Box 148			Street Address 19 Kenilworth Way		
City Saunderstown	State RI	Zip 02874	City Pawtucket	State RI	Zip 02860
Director Name Mary Daly			Director Name Conley Wake Zani		
Street Address 61 Cooke Street			Street Address 1350 Anthony Road		
City Providence	State RI	Zip 02906	City Portsmouth	State RI	Zip 02871
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.					
<small>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</small>					
Name of Officer/Authorized Representative Mary Daly, Treasurer					Date June 4, 2018
Signature of Officer/Authorized Representative <i>Mary Daly</i>					FILED

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

JUN - 4 2018
BY *JO* 331897
FORM 631 - Revised: 11/2017

ID No. 486996

Harvard Business School Associate – SNE

6. Directors (continued)

Lisa Churchville
PO Box 3142
Narragansett, RI 02882

Richard Bland
18 Johnson Drive
Norton, MA 02766

John Barrett
7103 North Crossway Road
Fox Point, WI 53217