RI SOS Filing Number: 201868087710 Date: 6/15/2018 10:09:00 AM



# State of Rhode Island and Providence Plantations Office of the Secretary of State

**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: 2018

- 1. Corporate ID No. 000090426
- 2. Name of Corporation KAREN M. SWANSON MEMORIAL SCHOLARSHIP FUND
- 3. State of Incorporation

State: RI

#### **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

6

Fee: \$20.00

813219

## 4. Corporate Address in Rhode Island

No. and Street:

**5 JAMES PLACE** 

City or Town:

**EXETER** 

State: RI

Zip: 02822

Country: USA

#### 5. Foreign Corporation. Enter Principal Office Address

No. and Street:

**5 JAMES PLACE** 

City or Town:

EXETER

State: RI Zip: 02822

Country: UNI

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

TO PROVIDE A SCHOLARSHIP FOUNDATION FOR THE PURPOSE OF PROVIDING SCHOLARSHIP/EDUCATIONAL FUNDING FOR YOUTHS ENTERING THE EMERGENCY MEDICAL AND/OR FIRE SCIENCES FIELDS.

#### 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### Incorporator is no longer applicable; please delete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	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	JOHN BERGANTINI	45 RED FEATHER TRAIL
		SOUTH KINGSTOWN, RI 02882- USA
VICE PRESIDENT	SCOTT GRANT KETTELLE	5 JAMES PLACE
		EXETER, RI 02822 USA
DIRECTOR	DAWN BROWN	84 ESSEX ROAD
		NORTH KINGSTOW, RI 02852 USA
DIRECTOR	SILAS CLARK BARBER	1120 TEN ROD ROAD
		NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	CHRISTOPHER GUESS	SCRABLETOWN ROAD
		NORTH KINGSTOWN, RI 02852 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

SCOTT G. KETTELLE 305 TEN ROD ROAD EXETER, RI 02822

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

Signed this 15 Day of June, 2018 at 10:10:09 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 SCOTT G KETTELLE Signature of Authorized Person

Form No. 631 Revised 09/07

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