



**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:** 2019

**1. Corporate ID No.** 000081387

**2. Name of Corporation** Fraunhofer USA, Inc.

**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

813211

**4. Corporate Address in Rhode Island**

No. and Street: 2800 FINANCIAL PLAZA

City or Town: PROVIDENCE

State: RI

Zip: 02903

Country: USA

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

No. and Street: 44792 HELM STREET

City or Town: PLYMOUTH

State: MI

Zip: 48170

Country: USA

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

EXCLUSIVELY FOR CHARITABLE AND EDUCATIONAL PURPOSES OF SECTION 501(C)  
(3)

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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**

| <b>Title</b> | <b>Individual Name</b><br>First, Middle, Last, Suffix | <b>Address</b><br>Address, City or Town, State, Zip Code, Country              |
|--------------|-------------------------------------------------------|--------------------------------------------------------------------------------|
| PRESIDENT    | THOMAS SCHUELKE                                       | 44792 HELM STREET<br>PLYMOUTH, MI 48170 USA                                    |
| TREASURER    | ERIN SIMMONDS                                         | FRAUNHOFER USA, INC., HEADQUARTERS, 44792 HELM ST.<br>PLYMOUTH, MI 48170 USA   |
| SECRETARY    | MARK EBY                                              | 320 MILLER AVE., SUITE 190<br>ANN ARBOR, MI 48103 USA                          |
| DIRECTOR     | J. MICHAEL BOWMAN                                     | 1 INNOVATION WAY, SUITE 301<br>NEWARK, DE 19711 USA                            |
| DIRECTOR     | BRIAN DARMODY                                         | 4113 RIGGS ALUMNI CENTER, UNIVERSITY OF MARYLAND<br>COLLEGE PARK, MD 20742 USA |
| DIRECTOR     | JOHANN FECKL                                          | 44792 HELM STREET<br>PLYMOUTH, MI 48170 USA                                    |
| DIRECTOR     | ALEXANDER KURZ                                        | 44792 HELM STREET<br>PLYMOUTH, MI 48170 USA                                    |
| DIRECTOR     | JOHN F. REID                                          | ONE DEER PLACE<br>MOLINE, IL 61265 USA                                         |
| DIRECTOR     | ENDRIK WILHELM                                        | 44792 HELM STREET<br>PLYMOUTH, MI 48170 USA                                    |
| DIRECTOR     | STEPHEN WILLIAMS                                      | 3306 GENTLE COURT<br>ALEXANDRIA, VA 22310 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 24 Day of June, 2019 at 12:18:53 PM 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 ERIN SIMMONDS  
Signature of Authorized Person

Form No. 631  
Revised 09/07