RI SOS Filing Number: 202044058490 Date: 7/1/2020 4:00:00 PM

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: Non-Profit Corporation



- --> Filing period. June 1 June 30
- → Filing Foo \$20 00
- → Penalty Additional \$25.00 fee if form is not filed by July 30

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Entity ID Number	2. Exact name of the Corporation						
001681287	The Judy Weidele Memorial Scholarship						
3 State of Incorporation	5. Briof description of the character of business conducted in Rhode Island						
RI	For the purpose of raising funds, providing scholarships, and supporting education.						
4. NAICS Code	This organization is organized exclusively for charitable, religious, educational, and						
813211 - Grantmaking Fo	scientific purposes under Section 501(c)(3) of the Internal Revenue Code.						
6. Principal Office Address			City	Stato	Zip		
137 Anan Wade Road			N. Scituate	RI	02857		
7 List ALL officers (names and addresses) Check the box to indicate an attachment							
President Name Christopher Stanley			Vice-President Name Charles CTPCKWC11				
Street Address 402 Market St			Street Address 76A Winsor Road				
City Warren	State RI	^{Zip} 02885	City Foster	State RI	Zip 02825		
Secretary Name Joan Kenney		<u>. </u>	Trnasurer Nume Antonia Hay 5				
Street Address 170 Old Plainfield Pike		Street Address 37 Wood Road					
City Foster	State RI	Z _{IP} 02825	City Chepachet	Siale RI	^{Zi0} 02814		
8. List ALL directors (names and addresses). Rt Corporations MUST list at least THREE directors. Check the box to indicate an attachment							
Director Name Christopher Stanley		Director Name Charles STOC-KWC/					
Street Address 402 Market St			Street Address 76A Winsor Road				
Cily Warren	State RI	Zip 02885	City Foster	State RI	^{Z₁p} 02825		
Director Name Joan Kenney			Director Name Antonia Hay 5				
Street Address 170 Old Plainfield Pike			Sirnel Address 37 Wood Road				
Cily Foster	State RI	Z _I V 02825	City Chepachet	State Ri	^{Ζφ} 02814		
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.							
This report must be signed by either the President, Vice Principel. Societary Assistant Secretary. Imposure: duly Authorized Rounnsentative, Receiver or Trustey.							
Name of Officer/Authorized Representative				Date	M - 0		
ANTONIA A. HAYS				Dun	-7-2019		
Signature of Officer/Authorized Représentative							
Hut A. Haya							

MAIL TO:

Division of Business Services

148 W. Rivor Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Name: The Judy Weidele Memorial Scholarship

ID: 001681287

Attachment Board of Directors

Emily Weidele Amy Weidele

18 E. Killingly Road 3 Ledge Road

Foster, RI 02825 Foster, RI 02825

Christopher David Weidele