



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: June 1 - June 30 • Filing Fee: \$20.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 110575	2. Name of Corporation The Summer Institute			
3. State of Incorporation RHODE ISLAND	4. Corporate address in Rhode Island - Street Address 99 POWER STREET	City PROVIDENCE	Zip 02906-	
5. Foreign corporation: Enter principal office address		City	State	Zip

6. Brief Description of the character of the affairs which are actually conducted in Rhode Island
TO CONDUCT EDUCATIONAL MEETINGS WITH AN EMPHASIS ON BUSINESS EDUCATION.

7. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) ☒ FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Michael W. Joukowsky	Vice President Name None				
Street Address 99 Power Street	Street Address				
City Providence	State RI	Zip 02906	City	State	Zip
Secretary Name Michael W. Joukowsky	Treasurer Name Michael W. Joukowsky				
Street Address 99 Power Street	Street Address 99 Power Street				
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906

8. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23

Director Name Michael W. Joukowsky	Director Name Sarah T. Dowling				
Street Address 99 Power Street	Street Address One Citizens Plaza, 8th Floor				
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02903
Director Name Madeleine Telfeyan	Director Name None				
Street Address 99 Power Street	Street Address				
City Providence	State RI	Zip 02906	City	State	Zip

9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13

Agent Name SARAH T. DOWLING, ESQ.	Address	
Address One Citizens Plaza, 8th Floor	City Providence	Zip 02903

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



FILED

1 1 0 5 7 5

JUN 21 2005

*110575 DNP 06/10/05 04:30:11 PM By Kmc
File Date June 21, 2005
Check No. 150 C69436
By: Kmc
FOR SECRETARY OF STATE USE ONLY

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.

Michael W. Joukowsky 6-15-05
Signature of Officer Date
MICHAEL W. JOUKOWSKY
Print or Type Name of Officer
PRESIDENT
Title of Officer

The Summer Institute

ID No. 110575

2005 Non-Profit Annual Report

ADDENDUM TO ITEM 7

7. **ADDITIONAL OFFICER**

<u>TITLE</u>	<u>NAME</u>	<u>ADDRESS</u>
Assistant Secretary	Madeleine Telfeyan	99 Power Street Providence, RI 02903

299941_1

05 JUN 21 PM 2:04
ST. J. 101
ST. J. 101



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Matthew A. Brown, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: June 1 - June 30 • Filing Fee: \$20.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 110575	2. Name of Corporation The Summer Institute		
3. State of Incorporation RHODE ISLAND	4. Corporate address in Rhode Island - Street Address 99 POWER STREET	City PROVIDENCE	Zip 02906-
5. Foreign corporation: Enter principal office address		City	State Zip
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island TO CONDUCT EDUCATIONAL MEETINGS WITH AN EMPHASIS ON BUSINESS EDUCATION.			

7. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Michael W. Joukowsky			Vice President Name		
Street Address 99 Power Street			Street Address		
City Providence	State RI	Zip 02906	City	State	Zip
Secretary Name Michael W. Joukowsky			Treasurer Name Michael W. Joukowsky		
Street Address 99 Power Street			Street Address 99 Power Street		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906

8. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23					
Director Name Michael W. Joukowsky			Director Name Sarah T. Dowling		
Street Address 99 Power Street			Street Address 2300 Financial Plaza		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02903
Director Name Madeleine Telfeyan			Director Name None		
Street Address 99 Power Street			Street Address		
City Providence	State RI	Zip 02906	City	State	Zip

9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-78			
Agent Name SARAH T. DOWLING, ESQ.		Address 2300 FINANCIAL PLAZA	
Address		City PROVIDENCE	Zip 02903

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



1 1 0 5 7 5

110575 DNP 06/08/04 10:55:32 AM

File Date 6/16/04

Check No. 149 M34766

By: [Signature]

FOR SECRETARY OF STATE USE ONLY

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.

Signature of Officer Madeleine Telfeyan 6-14-04

Date

Print or Type Name of Officer

Director

Title of Officer

Asst.

Sec.

The Summer Institute

ID No. 110575

2004 Non-Profit Annual Report

ADDENDUM TO ITEM 7

7. **ADDITIONAL OFFICER**

<u>TITLE</u>	<u>NAME</u>	<u>ADDRESS</u>
Assistant Secretary	Madeleine Telfeyan	99 Power Street Providence, RI 02903

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

Filing Period: June 1 - June 30 • Filing Fee: \$20.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 110575		2. Name of Corporation The Summer Institute	
3. State of Incorporation RHODE ISLAND		4. Corporate address in Rhode Island - Street Address 99 Power Street	
5. Foreign corporation. Enter principal office address N/A		City Providence	Zip 02906
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island. TO CONDUCT EDUCATIONAL MEETINGS WITH AN EMPHASIS ON BUSINESS EDUCATION.		City	State

7. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Michael W. Joukowsky			Vice President Name Madeleine Telfeyan		
Street Address 99 Power Street			Street Address 99 Power Street		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906
Secretary Name Michael W. Joukowsky			Treasurer Name Michael W. Joukowsky		
Street Address 99 Power Street			Street Address 99 Power Street		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906

8. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) ☐ FILL IN THE SPACES BEFORE USING ATTACHMENTS
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23

Director Name Michael W. Joukowsky			Director Name Madeleine Telfeyan		
Street Address 99 Power Street			Street Address 99 Power Street		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906
Director Name Sarah T. Dowling			Director Name		
Street Address 2300 Financial Plaza			Street Address		
City Providence	State RI	Zip 02903	City	State	Zip

9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

Agent Name SARAH T. DOWLING, ESQ.		Address	
Address 2300 FINANCIAL PLAZA		City PROVIDENCE	Zip 02903

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 1 0 5 7 5 *

File Date 6-18-03
Check No. 0660066
By KMC
FOR SECRETARY OF STATE USE ONLY

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.

Signature of Officer Madeleine Telfeyan		Date June 16, 2003
Print or Type Name of Officer Vice President		
Title of Officer		

Filing Fee: \$20.00

To be filed annually during
the month of June



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Corporations Division
100 North Main Street Providence, Rhode Island 02903-1335
Telephone (401) 222-3040

NON-PROFIT CORPORATION

Corporate ID Number DNP-110575

Annual Report for the year 2002

1. The name of the corporation is The Summer Institute
2. The state or other jurisdiction under the laws of which it is incorporated is RHODE ISLAND
3. The address of the registered office of the corporation in this state is 2300 FINANCIAL PLAZA PROVIDENCE, RI 02903-
and the name of its registered agent in this state at that address is SARAH T. DOWLING, ESQ.
4. The character of the affairs which it is actually conducting in Rhode Island, briefly stated, is to conduct educational meetings with an emphasis on business education.
5. If a foreign corporation, the address of its principal office in the state or other jurisdiction under the laws of which it is incorporated is N/A
6. Corporate address in Rhode Island 99 Power Street, Providence, RI 02906
7. Names and addresses of its directors and officers: *(In compliance with 7-6-23 of the R.I.G.L. 1956, as amended, the number of directors of a domestic (Rhode Island) corporation shall not be less than three (3).)*

NAME	OFFICE	ADDRESS
<u>Michael W. Joukowsky</u>	<u>Director</u>	<u>99 Power Street, Providence, RI 02906</u>
<u>Sarah T. Dowling</u>	<u>Director</u>	<u>2300 Financial Plaza, Providence, RI 02903</u>
<u>Madeleine Telfeyan</u>	<u>Director</u>	<u>99 Power Street, Providence, RI 02906</u>
<u>Michael W. Joukowsky</u>	<u>President</u>	<u>99 Power Street, Providence, RI 02906</u>
<u>Madeleine Telfeyan</u>	<u>Vice-President</u>	<u>99 Power Street, Providence, RI 02906</u>
<u>Michael W. Joukowsky</u>	<u>Secretary</u>	<u>99 Power Street, Providence, RI 02906</u>
<u>Michael W. Joukowsky</u>	<u>Treasurer</u>	<u>99 Power Street, Providence, RI 02906</u>

Dated: 5/30/02

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.

The Summer Institute

Exact Name of Corporation

By Madeleine Telfeyan

Title VICE PRESIDENT
(Report must be signed by an officer)

Form No. 631
Revised 5/98

FOR SECRETARY OF STATE USE ONLY

File Date: 6-6-02

Check No.: 225

By: DNF



 Filing Fee: \$20.00

To be filed annually during
the month of June



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Corporations Division
100 North Main Street Providence, Rhode Island 02903-1335
Telephone (401) 222-3040

NON-PROFIT CORPORATION

Corporate ID Number DNP-110575

Annual Report for the year 2001

1. The name of the corporation is The Summer Institute
2. The state or other jurisdiction under the laws of which it is incorporated is RHODE ISLAND
3. The address of the registered office of the corporation in this state is 2300 FINANCIAL PLAZA PROVIDENCE, RI
02903-
and the name of its registered agent in this state at that address is SARAH T. DOWLING, ESQ.
4. The character of the affairs which it is actually conducting in Rhode Island, briefly stated, is to conduct educa-
tional meetings with an emphasis on business education
5. If a foreign corporation, the address of its principal office in the state or other jurisdiction under the laws of which it is
incorporated is N/A
6. Corporate address in Rhode Island 99 Power Street, Providence, RI 02906
7. Names and addresses of its directors and officers: *(In compliance with 7-6-23 of the R.I.G.L. 1956, as amended, the
number of directors of a domestic (Rhode Island) corporation shall not be less than three (3).)*

NAME

OFFICE

ADDRESS

See Exhibit A attached

Director

Director

Director

See Exhibit A attached

President

Vice-President

Secretary

Treasurer

Dated: _____

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.



* 1 1 0 5 7 5 *

FOR SECRETARY OF STATE USE ONLY

File Date: 6-28-01

Check No.: 181

By: AMF

The Summer Institute

Exact Name of Corporation

By

✓ Title

President

(Report must be signed by an officer)

Form No. 631
Revised 5/98

EXHIBIT A
The Summer Institute
2001 Annual Report

BOARD OF DIRECTORS

Sarah T. Dowling	2300 Financial Plaza, Providence, RI 02903
Michael W. Joukowsky	99 Power Street, Providence, RI 02903
Madeleine Telfeyan	99 Power Street, Providence, RI 02903

OFFICERS

<u>Title</u>	<u>Name</u>	<u>Address</u>
President	Michael W. Joukowsky	99 Power Street, Providence Rhode Island 02906
Secretary	Michael W. Joukowsky	99 Power Street, Providence Rhode Island 02906
Assistant Secretary	Madeleine Telfeyan	99 Power Street, Providence Rhode Island 02906
Treasurer	Michael W. Joukowsky	99 Power Street, Providence Rhode Island 02906