



State of Rhode Island
Department of State - Business Services Division

FILED

Annual Report for the year: 2021
Non-Profit Corporation

JUL 15 2021
 BY *[Signature]*

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

1. Entity ID Number 110527		2. Exact name of the Corporation The Wyner Stokes Foundation			
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island Charitable Foundation			
4 NAICS Code 813219 - Other Grantmaking					
6. Principal Office Address 67 Central Pike			City North Scituate	State RI	Zip 02857
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Daniel M. Wyner			Vice-President Name		
Street Address 67 Central Pike			Street Address		
City North Scituate	State RI	Zip 02857	City	State	Zip
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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 Daniel M. Wyner			Director Name Madelyn E. Wyner		
Street Address 67 Central Pike			Street Address 67 Central Pike		
City North Scituate	State RI	Zip 02857	City North Scituate	State RI	Zip 02857
Director Name Loma D. J. Stokes			Director Name		
Street Address 67 Central Pike			Street Address		
City North Scituate	State RI	Zip 02857	City	State	Zip
9. The Registered Agent information of record with the RI Department of State is accurate. 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.					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>					
Name of Officer/Authorized Representative Daniel M. Wyner				Date June 26, 2021	
Signature of Officer/Authorized Representative <i>[Signature]</i>					

MAIL TO:
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