	State of Rhode Island	Fee: \$20.00		
	Office of the Secretary of State			
	Division Of Business Services			
	148 W. River Street Providence RI 02904-2615			
1636	(401) 222-3040			
Non Drofit Cornerat				
Non-Profit Corporat Annual Report Filing Period: February				
	G.L. 7-6-94, each corporation failing or refusing to file its time prescribed by law (R.I.G.L. 7-6-91) is subject to a			
ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2024: 2024				
1. Corporate ID No. <u>000650864</u>				
2. Name of Corporation The Ethan Henry Lecours Foundation				
3. State of Incorporation				
State: <u>RI</u>				
NAICS CODE				
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 <u>click here.</u>				
NAICS Code				
<u>813219</u>				
4. Principal Office Ad	dress			
No. and Street:	PO BOX 193			
City or Town:	$\underline{\text{LINCOLN}} \qquad \text{State: } \underline{\text{RI}} \qquad \text{Zip: } \underline{02865} \qquad \text{Country:}$	<u>USA</u>		
5. Brief Description of the Character of the Affairs Conducted in Rhode Island				
CHARITABLE PURPOSES. MAKE MONETARY DONATIONS AND/OR MATERIAL				
DONATIONS TO ORGANIZATIONS AND/OR INDIVIDUALS IN SUPPORT OF PEOPLE				
WITH DEVELOPMENTAL AND/OR INTELLECTUAL DISABILITIES OR TO UNDERPRIVILEGED CHILDREN.				
UNDERPRIVILEGE	<u>D CHILDREN.</u>			
6. Names and Addresses of the Officers and Directors:				
All Directors and Officers must be listed individually. The number of DIRECTORS of a Rhode Island Corporation shall not be less than 3.				

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country	
PRESIDENT	JULIE HOWARD LECOURS	83 WILBUR ROAD LINCOLN, RI 02865 USA	
TREASURER	RICHARD MARCHANT	80 TOWER HILL ROAD CUMBERLAND , RI 02864 USA	
DIRECTOR	MIRIAM PERRY	165 CANONCHET TRAIL CRANSTON , RI 02905 USA	
DIRECTOR	MICHAELA ALDRIDGE	121 GREENSLIT AVE PAWTUCKET , RI 02861 USA	
DIRECTOR	ALEXIA GROSSO	755 MARGARET HENRY ROAD STERLING , CT 06377 USA	
DIRECTOR	JOHN BAXTER	96 BREWSTER STREET PAWTUCKET, RI 02860 USA	
DIRECTOR	GUIOMAR PIMENTEL	29 REGINA DRIVE SCITUATE , RI 02066 USA	

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

JULIE HOWARD-LECOURS 7 ROSEWOOD DRIVE NORTH PROVIDENCE, RI 02904

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

Signed this 9 Day of February, 2024 at 12:20:53 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 JULIE HOWARD LECOURS

Signature of Authorized Person

Form No. 631 Revised 09/07

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