| | State of Rhode Island Office of the Secretary of State | Fee: \$20.00 | | |
|---|---|-----------------|--|--|
| | Division Of Business Services | | | |
| | 148 W. River Street | | | |
| | Providence RI 02904-2615 | | | |
| 1636 | (401) 222-3040 | | | |
| Non-Profit Corporation | | | | |
| Annual Report Filing Period: February 1 - May 1 | | | | |
| | | | | |
| 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 - ENTER THE CURRENT YEAR 2025: 2025 | | | | |
| 1. Corporate ID No. 001657235 | | | | |
| 2. Name of Corporation Richard F. Dube Memorial Scholarship Fund, Inc. | | | | |
| 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 Address | | | | |
| No. and Street: | <u>6 FOREST HILL DRIVE</u> | | | |
| City or Town: | NORTH SMITHFIELD State: <u>RI</u> Zip: <u>02896</u> Count | try: <u>USA</u> | | |
| 5. Brief Description of the Character of the Affairs Conducted in Rhode Island | | | | |
| | | | | |
| IS TO PROVIDE SCHOLARSHIPS TO HIGH SCHOOL SENIORS PURSUING A CAREER IN | | | | |
| EDUCATION, OR FOR ANY OTHER PURPOSE FOR WHICH CORPORATIONS MAY BE | | | | |
| ORGANIZED UNDER THE NONPROFIT CORPORATION ACT AS A CHARITABLE | | | | |
| CORPORATION, INCLUDING FOR SUCH PURPOSES, THE MAKING OF | | | | |
| DISTRIBUTIONS TO ORGANIZATIONS THAT QUALIFY AS EXEMPT | | | | |
| ORGANIZATIONS, UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, OR THE CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE. | | | | |
| | | <u>,,,</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 |
|----------|--|--|
| DIRECTOR | MARC F. DUBOIS | 6 FOREST HILL DRIVE NORTH SMITHFIELD, RI 02896 USA |
| DIRECTOR | KAREN B. DUBOIS | 6 FOREST HILL DRIVE NORTH SMITHFIELD, RI 02896 US |
| DIRECTOR | KEVIN M. DUBE | 46 FOREST STREET MIDDLEBORO, MA 02346 US |

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

KAREN B. DUBOIS 6 FOREST HILL DRIVE NORTH SMITHFIELD , RI 02896

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

Signed this 14 Day of February, 2025 at 7:37:29 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 KAREN B DUBOIS

Signature of Authorized Person

Form No. 631 Revised 09/07

© 2007 - 2025 State of Rhode Island All Rights Reserved