



**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
(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. 001694588

2. Name of Corporation Jacob A. Crowell Memorial Scholarship Foundation

3. State of Incorporation

State: RI

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 [click here](#).

NAICS Code

813219

4. Principal Office Address

No. and Street: 26 PILGRIM AVENUE

City or Town: RUMFORD

State: RI

Zip: 02916-0000

Country: USA

5. Brief Description of the Character of the Affairs Conducted in Rhode Island

OFFER A MONETARY SCHOLARSHIP TO AN EAST PROVIDENCE HIGH SCHOOL GRADUATE ATTENDING THEIR FRESHMAN YEAR IN COLLEGE; FINANCIAL ASSISTANCE TO A CHILD CAMPER AT BOTH THE BOYS AND GIRLS CLUB OF PAWTUCKET (CAMP RAMSBOTTOM) AND THE BOYS AND GIRLS CLUB OF NEWPORT COUNTY (CAMP GROVESNOR)

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	TRINA CROWELL	26 PILGRIM AVENUE RUMFORD, RI 02916 UNI
DIRECTOR	REBEKAH VIEIRA	10 WILLINGTON ROAD PAWTUCKET, RI 02861 USA
DIRECTOR	LORI BREWSTER	30 BRIDHAM HILL ROAD ATTLEBORO, MA 02703 USA
DIRECTOR	MICHAEL GORMAN	3098 RUE D ORLEANS #209 SAN DIEGO, CA 92110 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

TRINA M. CROWELL 26 PILGRIM AVENUE RUMFORD , RI 02916

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

Signed this 10 Day of March, 2025 at 8:53:42 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 TRINA M. CROWELL
Signature of Authorized Person

Form No. 631
Revised 09/07

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