

A. Ralph Mollis, Secretary of State Corporations Division

148 W. River Stree Providence, RI 02904-2615

401.222,3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

Filing Period: June 1 - June 30 • Filing Fee: \$20.00* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

* 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. 1. Corporate ID No.	D. Nama of Co.	Venetical	-	•	· · ·		
147831	1 "	2. Name of Corporation					
3. State of Incorporation	4. Corporate ac	L.J. SALVATORE MEMORIAL FOUNDATION, INC. 4. Corporate address in Rhode Island - Street Address City Zip					
RHODE ISLAND	950 Smith			Providence	02908		
5. Foreign corporation. Enter			City	State	2ip		
			1		7.1p		
6. Brief Description of the chare	acter of the affairs whi	ch are actually conducted in R	Rhode Island				
Non-Profit Scholarship							
·	<u> </u>						
	SSES OF THE OF	FICERS: ("X" BOX FOR A	TTACHMENT) [FILL IN SPACE	S BEFORE USING ATTA	CHMENTS		
President Name			Vice President Name				
Kathleen Salvatore			Louis J. Salvatore, Sr.				
Street Address			Street Address				
40 Wellesley Avenue	State		40 Wellesley Avenue				
North Providence	RI	Zip	City	State	Zip		
Secretary Name	INI	02911	North Providence	RI	02911		
Mary D. Cannon			Treusurer Name Kathleen Salvatore				
Street Address	******	 	Street Address				
42 Wellesley Avenue			40 Wellesley Avenue				
City	State	Zip	City:	State	Zip		
North Providence	RI	02911	North Providence	RI	02911		
			ATTACHMENT) FILL IN SPACE	S REFORE TISING ATT	LOTHITS		
THE NUMBER OF DIRE	CTORS OF A DO	MESTIC (RHODE ISLA	ND) CORPORATION SHALL NO	OT RE LESS THAN THE	EE(2) DICT 7632		
Director Name		and the second s	Director Name		22 (J). M.I.G.L. 7-0-23		
Kathleen Salvatore			Louis J. Salvatore, Si	Louis I Salvatoro Sr			
Street Address			Street Address				
40 Wellesley Avenue			40 Wellesley Avenue				
City	State	Zip	City:	State	Zip		
North Providence	Ri	02911	North Providence	Ri	02911		
Director Name			Director Name	1.1.	102011		
Mary D. Cannon							
Street Address			Street Address				
42 Wellesley Avenue							
City	State	Zip	CHy	State	Zip		
North Providence	JRI	02911					
9. REGISTERED AGENT	IN RHODE ISLA	ND	Strategy of the Control				
This information is corren	itly of record in th	e Office of the Secretory	of State. Changes require filing of I	Samu 641 DIOI 251	3/7 / 70		
This report n	nust be signed by	either the President, Vic	e President, Secretary, Assistant	Secretary, Treasurer, Rec	ceiver or Trustec		
				•			

14783	1

File Date	FILED	PM 1: 20	ZI YAM EQOS
	MAY 1 8 2009	AIO SNO	
_{Bv.} B	y_123	VED V	13.73 8 ==
_,	FOR SECRETARY OF STAT	E USE ONLY	

Under penalty of perjury, I declare and affirm that I have exa	mined this
eport, including any accompanying schedules and statements	and that al
statements contained herein are thue and correct	/

KATHLEEN SALVATORE Print or Type Name of Officer

PRESIDENT

Title of Officer

Form 631 Rev. 09/17