



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
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. 27398		2. Name of Corporation KELLEY-GAZZERRO SENIOR CITIZENS CLUB	
3. State of Incorporation RHODE ISLAND		4. Corporate address in Rhode Island - Street Address 1418 PLAINFIELD STREET	
		City CRANSTON	Zip 02920
5. Foreign corporation. Enter principal office address		City	State
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name ELLA CALABRO		Vice President Name ANNA CALABRO	
Street Address 131 PLEASANT VIEW AVE.		Street Address 131 PLEASANT VIEW AVE.	
City SMITHFIELD	State R.I.	Zip 02917	City SMITHFIELD
Secretary Name MARGARET DE RAIMO		Treasurer Name MARGARET DE RAIMO	
Street Address 83 MADISON AVENUE		Street Address 83 MADISON AVENUE	
City CRANSTON	State R.I.	Zip 02920	City CRANSTON
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23			
Director Name LOUISE SIMONELLI		Director Name ISABELL TARTAGLIA	
Street Address 41 EDDY STREET		Street Address 11 YORK DRIVE	
City CRANSTON	State R.I.	Zip 02920	City COVENTRY
Director Name NORMA FERRI		Director Name	
Street Address 47 SPOKANE STREET		Street Address	
City PROVIDENCE	State R.I.	Zip 02904	City
9. REGISTERED AGENT IN RHODE ISLAND ELLA CALABRO			
This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-78			

This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

FILED

File Date JUN 05 2009

Check No. By 863

By:

FOR SECRETARY OF STATE USE ONLY

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.

Margaret DeRaimo 6-2-09
Signature of Officer Date

MARGARET DERAIMO
Print or Type Name of Officer

SECRETARY/TREASURER
Title of Officer