

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615

401.222.3040

2010

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

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. Gorporate ID No. 2. Name of Corporation 92521 Galkin Private Foundation 3. State of Incorporation 4. Corporate address in Rhode Island - Street Address CRANSTON 02910 RHODE ISLAND 110 ELSIE STREET City State Zip5. Foreign corporation. Enter principal office address 6. Brief Description of the character of the affairs which are actually conducted in Rhode Island EXCLUSIVELY FOR CHARITABLE PURPOSES 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) [FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name WARREN B. GALKIN ROBERT T. GALKIN Street Address Street Address 30 SAGE DRIVE 110 ELSIE STREET State Zip City State Ζip City 02886 RI 02910 WARWICK CRANSTON RΙ Secretary Name WARREN B. GALKIN KEVIN I. ROSENBAUM Street Address Street Address C/O POORE & ROSENBAUM, 30 EXCHANGE TERRACE 30 SAGE DRIVE Ζip City State ZipState City 02886 RI RΙ 102903 WARWICK PROVIDENCE 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION <u>SHALL NOT BE LESS THAN THREE</u> (3). R.I.G.L. 7-6-23 Director Name WARREN B. GALKIN ROBERT T. GALKIN Street Address Street Address 30 SAGE DRIVE 110 ELSIE STREET State ZipCity State Zip City 02886 WARWICK RI 02910 RI CRANSTON Director Name Director Name KEVIN I. ROSENBAUM Street Address Street Address C/O POORE & ROSENBAUM, 30 EXCHANGE TERRACE State City State City 02903 RI **PROVIDENCE** 9. REGISTERED AGENT IN RHODE ISLAND ىب 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

	92521		Under penalty of perjury, I declare and affirm tha report, including any accompanying schedules and	panying schedules and statements, and that all	
File Date	FILED		statements contained herein after two and correct. Signature of Officer	.5 (27/2016 Date	
Check No By:	By 02 2010 73		ROBERT T. GALKIN Print or Type Name of Officer PRESIDENT		
FOR	SECRETARY OF STATE US ONLY	-	Title of Officer	Form 631 Rev. 09/17	