RI SOS Filing Number: 201066650680 Date: 08/24/2010 4:00 PM

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 2010

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.	2. Name of Corporation		
177425	THE WISH WALKERS		
3. State of Incorporation	4. Corporate address in Rhode Island - Street Address	City	Zip
RI	8 MAY STREET #6	NO PROV	02904
5. **Foreign corporation.** Enter principal office address	City	State	Zip
		RI	

6. Brief Description of the character of the affairs which are actually conducted in Rhode Island

WALK AROUND LINCOLN WOODS TO RAISE MONEY FOR BREAST CANCER , CHILDRENS WISHES OF RI JUVENILE DIABETES

7. NAMES AND ADDRESSES OF THE OFFICERS: *("X" BOX FOR ATTACHMENT)* ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name			Vice President Name		
THOMAS W LOLIO SR			LILLIAN A LOLII		
Street Address			Street Address		
8 MAY STREET #6			8 MAY STREET #6		
City	State	Zip	City	State	Zip
NO PROVIDENCE	RI	02904	NO PROVIDENCE	RI	02904
Secretary Name			Treasurer Name		
VINI AMES			ALFRED T RICCI		
Street Address			Street Address		
2 DAIL AVENUE			129 SCITUATE AVENUE		
City	State	Zip	City	State	Zip
NO PROVIDENCE	RI	02904	JOHNSTON	RI	02919

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 SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23

Director Name			Director Name		
THOMAS LOLIO SR			LILLIAN A LOLIO		
Street Address			Street Address		
8 MAY STREET #6			8 MAY STREET # 6		
City	State	Zip	City	State	Zip
NO PROVIDENCE	RI	02904	NORTH PROVIDENCE	RI	02904
Director Name			Director Name		
VINI AMES			ALFRED T RICCI		
Street Address			Street Address		
2 DAIL DRIVE			129 SCITUATE AVE		
City	State	Zip	City	State	Zip
NO PROVIDENCE	RI	02904	JOHNSTON	RI	02919T

9. REGISTERED AGENT IN RHODE ISLAND

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

[redacted] 177425

FILED

File Date 8 24 2010

Check No. By DS

By: 12/5/22

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CORPORATIONS DIV
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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.

Signature of Officer *Date*

Thomas W Lolio SR

Print or Type Name of Officer

PRESIDENT

Title of Officer

Form 631 Rev. 09/17