



**STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS**  
**Office of the Secretary of State - Division of Business Services**

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov/business

**NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2012**

Filing Period: June 1 - June 30 • This report must be typed or printed legibly.

Filing Fee: \$20.00 • FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

2012 JUN -4 AM 10:38  
 SECRETARY OF STATE  
 CORPORATIONS DIV

1. Entity ID No. <b>337872</b>		2. Exact name of the Corporation <b>TEAM TARRO, INCORPORATED</b>			
3. State of Incorporation <b>R.I.</b>		4. Brief description of the character of business conducted in Rhode Island <b>TO raise money FOR early detection and research for Breast Cancer</b>			
5. Principal office address <b>110 Alex Andee Mc Gregor Rd</b>		City <b>PAWTUCKET</b>	State <b>RI</b>	Zip <b>02861</b>	
<b>6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/></b>					
President Name <b>Robert D. TARRO, MD</b>			Vice-President Name <b>KATHRYN ROGERS</b>		
Street Address <b>110 Alexander Mc Gregor Rd</b>			Street Address <b>50 Kelley Ave</b>		
City <b>PAWTUCKET</b>	State <b>RI</b>	Zip <b>02861</b>	City <b>RUMFORD</b>	State <b>RI</b>	Zip <b>02916</b>
Secretary Name <b>Jacquelyn Rogers</b>			Treasurer Name <b>Robert D. TARRO, MD</b>		
Street Address <b>50 Kelley St</b>			Street Address <b>110 ALEXANDER MCGREGOR ST</b>		
City <b>RUMFORD</b>	State <b>RI</b>	Zip <b>02916</b>	City <b>PAWTUCKET</b>	State <b>RI</b>	Zip <b>02861</b>
<b>7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/></b>					
Director Name <b>Robert D. TARRO, MD</b>			Director Name <b>JEANNE O'NEILL</b>		
Street Address <b>110 Alexander Mc Gregor Road</b>			Street Address <b>57 GREGORY DRIVE</b>		
City <b>PAWTUCKET</b>	State <b>RI</b>	Zip <b>02861</b>	City <b>DEKUNK</b>	State <b>MA</b>	Zip <b>02771</b>
Director Name <b>JOHN M TARRO, M.D.</b>			Director Name <b>BARBARA <del>SCHEPPS</del> SCHEPPS, MD</b>		
Street Address <b>76 Seaview Ave</b>			Street Address <b>322 Blackstone Blvd.</b>		
City <b>CRAWSTON</b>	State <b>RI</b>	Zip <b>02905</b>	City <b>PROVIDENCE</b>	State <b>RI</b>	Zip <b>02906</b>
<b>8. REGISTERED AGENT IN RHODE ISLAND</b>					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 641.					

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

**DIRECTOR: KATHRYN ROGERS 50 KELLEY AVE RUMFORD RI 02861**

File Date \_\_\_\_\_  
 Check No \_\_\_\_\_  
 By: \_\_\_\_\_  
**FOR SECRETARY OF STATE USE ONLY**

**FILED**

**JUN 04 2012**

**171799**

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.

**Robert D. Tarro, MD** 6/4/12  
 Signature of Officer Date

**Robert D. TARRO, MD**  
 Print or Type Name of Officer

**PROSIDENT**  
 Title of Officer