



**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 2011**

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.

1. Entity ID No. <b>000030593</b>		2. Exact name of the Corporation <b>Portuguese Cultural Foundation</b>			
3. State of Incorporation <b>Rhode Island</b>		4. Brief description of the character of business conducted in Rhode Island <b>Disseminating Portuguese Culture in the United States</b>			
5. Principal office address <b>7 Samson Lane</b>		City <b>Middletown</b>		State <b>RI</b>	Zip <b>02842</b>
<b>. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/></b>					
President Name <b>Robert M. Silva, Esq</b>		Vice-President Name <b>Charlene A. Rose-Cirillo</b>			
Street Address <b>1100 Aquidneck Avenue</b>		Street Address <b>7 Samson Lane</b>			
City <b>Middletown</b>	State <b>RI</b>	Zip <b>02842</b>	City <b>Middletown</b>	State <b>RI</b>	Zip <b>02842</b>
Secretary Name <b>Charlene A. Rose-Cirillo</b>		Treasurer Name <b>John Pacheco</b>			
Street Address <b>7 Samson Lane</b>		Street Address <b>21 Pickett Road</b>			
City <b>Middletown</b>	State <b>RI</b>	Zip <b>02842</b>	City <b>East Providence</b>	State <b>RI</b>	Zip <b>02884</b>
<b>. 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>Paul J. Tavares</b>		Director Name <b>Senator Daniel DaPonte</b>			
Street Address <b>940 Veterans Memorial Parkway</b>		Street Address <b>690 Warren Avenue</b>			
City <b>Riverside</b>	State <b>RI</b>	Zip <b>02915</b>	City <b>East Providence</b>	State <b>RI</b>	Zip <b>02914</b>
Director Name <b>Adeline C. Rose</b>		Director Name			
Street Address <b>30 Willow Avenue</b>		Street Address			
City <b>Middletown</b>	State <b>RI</b>	Zip <b>02842</b>	City	State	Zip
<b>. 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*

File Date \_\_\_\_\_

Check No \_\_\_\_\_

By: \_\_\_\_\_

**FOR SECRETARY OF STATE USE ONLY**

**FILED**

JUN 25 2012

BY **2-173495**

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.

*Charlene A. Rose-Cirillo* 31 June 2012  
 Signature of Officer Date

**Charlene A. Rose-Cirillo**

Print or Type Name of Officer

**Vice-President/Secretary**

Title of Officer

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