



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

Fee: \$20.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Non-Profit Corporation
Annual Report**

Filing Period: June 1 - June 30

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.

ANNUAL REPORT YEAR: 2014

1. Corporate ID No. 000869853

2. Name of Corporation Foundation-Blue, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 469 CENTERVILLE RD
SUITE 206

City or Town: WARWICK State: RI Zip: 02886 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 469 CENTERVILLE RD
SUITE 206

City or Town: WARWICK State: RI Zip: 02886 Country: USA

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

TO PROVIDE SPORTS EQUIPMENT AND RELATED PRODUCTS AND SERVICES TO POOR DISTRESSED AND OR UNDER PRIVILEGED CHILDREN

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
TREASURER	NANCY ANN DEROCHAMBEAU	51 DUNNS CORNER RD WESTERLY , RI 02891 USA
INCORPORATOR	NANCY DEROCHAMBEAU	51 DUNNS CORNER ROAD

		WESTERLY, RI 02891 USA
DIRECTOR	JUSTINE SANTOS	13 LIVINGSTON PLACE, UNIT 2 MIDDLETOWN, RI 02842 USA
DIRECTOR	MATTHEW BISHOP	19 VALLEY DRIVE WESTERLY, RI 02891 USA

**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

KATHERINE A. MEROLLA, ESQ. 469 CENTERVILLE ROAD, SUITE 206 WARWICK , RI 02886

9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.

Signed this 30 Day of June, 2014 at 2:44:56 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By NANCY DEROCHAMBEAU
Signature of Authorized Person

Form No. 631
Revised 09/07

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