



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

**NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2014**

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>790458</b>		2. Exact name of the Corporation <b>SAM'S CHILDREN, INC.</b>			
3. State of Incorporation <b>CONNECTICUT</b>		4. Brief description of the character of business conducted in Rhode Island <b>A CHARITY TO HELP FAMILIES WITH CHILDREN SUFFERING SERIOUS ILLNESS OR CONDITION, WITH NON-MEDICAL ASSISTANCE TO EASE THEIR STRESS</b>			
5. Principal office address <b>2139 S. LAS DEANES HIGHWAY</b>		City <b>Rocky Hill</b>	State <b>CT</b>	Zip <b>06067</b>	
<b>6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT)</b>					
President Name <b>CHARLES DiFAZIO</b>			Vice-President Name <b>HAMID BIJARI</b>		
Street Address <b>166 ROLLING GREEN</b>			Street Address <b>38 BALTON ROAD</b>		
City <b>Middletown</b>	State <b>CT</b>	Zip <b>06067</b>	City <b>PROVIDENCE</b>	State <b>RI</b>	Zip <b>02906</b>
Secretary Name <b>SARA LUZMOOR</b>			Treasurer Name <b>TRACY SCHROEDER</b>		
Street Address <b>200 BLAKESLEE STREET #228</b>			Street Address <b>76 WAYNE DRIVE</b>		
City <b>Bristol</b>	State <b>CT</b>	Zip <b>06010</b>	City <b>PLAINVILLE</b>	State <b>CT</b>	Zip <b>06062</b>
<b>7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT)</b>					
Director Name <b>CHARLES DiFAZIO</b>			Director Name <b>HAMID BIJARI</b>		
Street Address <b>166 ROLLING GREEN</b>			Street Address <b>38 BALTON ROAD</b>		
City <b>Middletown</b>	State <b>CT</b>	Zip <b>06067</b>	City <b>PROVIDENCE</b>	State <b>RI</b>	Zip <b>02906</b>
Director Name <b>SARA LUZMOOR</b>			Director Name <b>TRACY SCHROEDER</b>		
Street Address <b>200 BLAKESLEE STREET</b>			Street Address <b>76 WAYNE DRIVE</b>		
City <b>Bristol</b>	State <b>CT</b>	Zip <b>06010</b>	City <b>PLAINVILLE</b>	State <b>CT</b>	Zip <b>06062</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, duly Authorized Representative, Receiver or Trustee

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

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

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

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**FILED**

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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.

*Charles DiFazio*

Signature of Officer or Authorized Representative

6/28/2014

Date

**PRESIDENT**

Print or Type Name of Officer or Authorized Representative