



**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. 000505835

2. Name of Corporation The Melissa Delmonico Scholarship Charity Foundation, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 6 BYRD STREET

City or Town: JOHNSTON

State: RI

Zip: 02919

Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

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

TO RAISE FUNDS TO PROVIDE SCHOLARSHIPS TO DESERVING INDIVIDUALS IN THE
MEMORY OF MELISSA DELMONICO

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Incorporator is no longer applicable; please delete**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
PRESIDENT	MICHAEL A DELMONICO	6 BYRD STREET JOHNSTON, RI 02919 USA
TREASURER	DAVID DELMONICO	35 HOWARD AVE PASCOAG, RI 02859 USA

SECRETARY	ANNETTE DELMONICO	135 NICHOLS RD HARRISVILLE, RI 02830 USA
VICE PRESIDENT	DONNA DELMONICO	135 NICHOLS RD HARRISVILLE, RI 02830 USA
DIRECTOR	DAVID DELMONICO	35 HOWARD AVENUE PASCOAG, RI 02859 USA
DIRECTOR	DONNA DELMONICO	135 NICHOLS RD HARRISVILLE, RI 02830 USA
DIRECTOR	ANNETTE DELMONICO	135 NICHOLS RD HARRISVILLE, RI 02830 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

MICHAEL DELMONICO 6 BYRD STREET JOHNSTON , RI 02919

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

Signed this 11 Day of December, 2014 at 7:49:06 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 DONNA DELMONICO
Signature of Authorized Person

Form No. 631
Revised 09/07

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