

1. Corporate ID No. 488373

A. Raiph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615

2. Name of Corporation lannotti Funeral Home, Inc.

401.222.3040

Providence, RI 02904-26

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2015

Filing Period: January 1 - March 1 • Filing Fee: \$50.00\* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

3. Street Address Principal Business Office 415 Washington Street			City Coventry	State RI	<sup>Zip</sup> 02816
4. Business Phone No. 401-821-1100  5. State of Incorporation Rhode Island					
Funeral home	Character of Business Condu				
	RESSES OF THE OFF	ICERS: ("X" BOX FOR ATTA	<i>CHMENT)</i> FILL IN	SPACES BEFORE USING	ATTACHMENTS
President Name Robert A. lannotti, Jr.			Vice President Name Kim D. lannotti		
Street Address 81 Valentine Circle			81 Valentine Circle		
Warwick	State RI	<sup>Zip</sup> 02886	City Warwick	State RI	<sup>Zip</sup> 02886
Secretary Name Kim D. lannotti			Treasurer Name Robert A. Iannotti, Jr.		
Street Address 81 Valentine Circle			Street Address 81 Valentine Circle		
City Warwick	State RI	<sup>Zip</sup> 02886	City Warwick	State RI	<sup>Ζψ</sup> 02886
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATT Director Name Robert A. lannotti, Jr.			ACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS  Director Name Kim D. lannotti		
Street Address			Street Address		
81 Valentine Circle			81 Valentine Circle		
City Warwick	State RI	2tp 02886	City Warwick	State RI	<i>Ζφ</i> 02886
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHOR	IZED			 D <i>("X" BOX FOR ATTAC</i> ECTION <u>MUST</u> BE COMPLETED	
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			Number of Shares	Class/Series	Par Value
			300	Common	0.01
			This St		endalisa in teras
This report must be eather report must be eather	xecuted on behalf of the	he corporation by an authorize e corporation by the Go ver o	d representative. If the	corporation is in the hand	ls of a receiver or trustee,
tills report must be ex	ecuted on benzii of th	e corporation de la castver d	or trustee.		
		DEC 2 2 2014			
			Under penalty of including any acc	perjury, I declare and affirm companying schedules and st	that I have examined this report atements, and that all statement
File Date		BY_Mi		are true and correct.	12/17/2014
		13610	Signature	()	Date
Check No.	——————————————————————————————————————		Robert A. Ia		
Ву:			Print or Type Name		
FOR SECRETAR	RY OF STATE USE ONLY		President		
			Title		Form 630 Day 09/09