

A. Ralph Mollis, Secretary of State

Corporations Division 148 W. River Street

Providence, RI 02904-2615

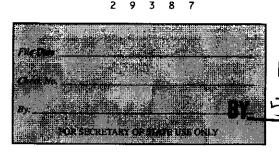
401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2015

Filing Period: June 1 - June 30 • Filing Fee: \$20.00 * THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK

* 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.

to a peranty jee of the jive.						
1. Corporate ID No.		2. Name of Corporation Scholarship Foundation of East Providence				
29387						
3. State of Incorporation	1 '	ldress in Rhode Island - Street	Address	City	Zip	
Rhode Island	50 Mayflov	ver Street		East Providence	02914	
5. Foreign corporation. Ente	r principal office addre	SS	Сиу	State	Zip	
6. Brief Description of the char	acter of the affairs whic	ch are actually conducted in F	Rhode Island			
Awarding scholarships	to East Providenc	e Students				
74 NAMES AND ADDRE	SSES OF THE OP	ficers: ('Y' box for a	TTACHWENT) PILL IN SPACE	S BEFORE USING ATTACE	IMBNTS III I I I I I I I I I I I I I I I I I	
President Name			Vice President Name			
Peter G. Barilla			Joan Kent			
Street Address			Street Address			
12 Miller Street			50 Mayflower Street			
City	State	Zip	City	State	Zip	
East Providence	RI	02916	East Providence	RI	02914	
Secretary Name Kathleen King			Treasurer Name Toni-Mara Spencer			
Street Address 70 Timberlane Drive			Street Address 327 Sutton Avenue			
City	State	Zip	City	State	Zip	
East Providence	RI	02915	East Providence	RI	02914	
8. NAMES AND ADDRE	SSES OF THE DIT	BCTORS: ("X" BOX FOR	elegichenden) Billein syac)	ES REPORE LISTNG ATTACT	HMENTS.	
			VO) CORPOR FOR VILLE			
Director Name			Director Name			
Susan Jordan			Alice Fontes			
Street Address			Street Address			
88 Harris Street			95 Hazard Avenue			
City	State	Zip	City	State	Zip	
East Providence	RI	02915	East Providence	RI	02914	
Director Name			Director Name			
Louise Paiva			Stephen Bentz			
Street Address			Street Address			
81 Harris Street			24 Dalton Street			
City	State	Zip	City	State	Zip	
East Providence	RI	02915	East Providence	RI	02916	
9. Me gist er ed agent	IN RHODE ISLA	vd - do not alter	Changes require filing of Ford	n 6412 k.t.g.l. 17-6-13 / 7		
Agent Name			Address			
Robert M. Brady			East Providence			
Address			City	Zip		
One Grove Avenue			RI	02914		
	ust be signed by a	sither the President Wa				
rms report ii	mat he signed by t	amer me Fresident, Vic	e President, Secretary, Assistant S	seciciary, i reasurer, Keceiv	er or trustee	



MAY 2 8 2015

Under penalty of perjury, I declare and affirm that I have examined this report including any accompanying schedules and statements, and that all statements

Signature of Officer

Date

Peter G. Barilla

Print or Type Name of Officer

PRESIDENT

Title of Officer