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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 2015

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.	2. Exact name of the Corporation
56911	**The Annamaria Saritelli-DiPanni Bel Canto Scholarship Fund, Inc.**
3. State of Incorporation **Rhode Island**	4. Brief description of the character of business conducted in Rhode Island **To provide vocal scholarships, annually, on a competitive basis, to young American opera singers between the ages of 21 and 33.**

5. Principal office address	City	State	Zip
55 Tremont Street	**Cranston**	**RI**	**02920**

6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐

President Name			Vice-President Name		
Annamaria Saritelli-DiPanni			**Ronald DiPanni**		
Street Address			Street Address		
55 Tremont Street			**55 Tremont Street**		
City	State	Zip	City	State	Zip
Cranston	**RI**	**02920**	**Cranston**	**RI**	**02920**
Secretary Name			Treasurer Name		
Elizabeth Rodi			**Ronald DiPanni**		
Street Address			Street Address		
111 Rutland Street			**55 Tremont Street**		
City	State	Zip	City	State	Zip
Cranston	**RI**	**02920**	**Cranston**	**RI**	**02920**

7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) ☐

Director Name			Director Name		
Elizabeth Rodi			**Michael Acciari**		
Street Address			Street Address		
111 Rutland Street			**4 Everbloom Street**		
City	State	Zip	City	State	Zip
Cranston	**RI**	**02920**	**Johnston**	**RI**	**02919**
Director Name			Director Name		
David Acciari			**None**		
Street Address			Street Address		
3 Needham Street			**None**		
City	State	Zip	City	State	Zip
Johnsston	**RI**	**02919**	**None**	**None**	**None**

8. REGISTERED AGENT IN RHODE ISLAND

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

FILED
JUN 04 2015
BY 3164

File Date _____
Check No _____
By: _____
FOR SECRETARY OF STATE USE ONLY

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.

R J di Panni 6/2/15
Signature of Officer or Authorized Representative Date

RONALD J. DiPANNI
Print or Type Name of Officer or Authorized Representative

Form No. 631
Revised: 04/2014

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