RI SOS Filing Number: 201564579960 Date: 07/08/2015 9:07 PM

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: 2015

1. Corporate ID No. 000505027

2. Name of Corporation Gizzi Family Health Awareness, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 36 HOPPIN ROAD
City or Town: NEWPORT State: RI Zip: 02840 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 OPERATE AN ORGANIZATION TO RAISE FUNDS FOR CANCER AWARENESS AND PREVENTION

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
SECRETARY	ANN GIZZI	44 MOHAWK DRIVE PORTSMOUTH, RI 02871 USA
BOARD MEMBER	ERIKA GIZZI	15 CASWELL AVENUE NEWPORT, RI 02840 USA

BOARD MEMBER	KEVIN BUCK	19 WILLIAM DRIVE MIDDLETOWN, RI 02842 USA
BOARD MEMBER	HEATHER SIMMONS	3 BROWNELL ROAD LITTLE COMPTON, RI 02837 USA
DIRECTOR	JAMES F. GIZZI, JR.	15 CASWELL AVENUE NEWPORT, RI 02840 USA
DIRECTOR	GREG GIZZI	342 BRAMANS LANE PORTSMOUTH, RI 02871 USA
DIRECTOR	PAULA MORRIS	36 HOPPIN ROAD NEWPORT, RI 02840 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

GREGORY F. FATER, ESQ. 55 MEMORIAL BOULEVARD NEWPORT , RI 02840

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

Signed this 8 Day of July, 2015 at 9:10:41 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 PAULA MORRIS
Signature of Authorized Person

Form No. 631
Revised 09/07