

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 na	2. Exact name of the Corporation Herma Moeller Procopiadi Foundation				
135478	Herma N					
3. State of Incorporation	4. Brief des	Brief description of the character of business conducted in Rhode Island				
Rhode Island	Provide	funding for othe	r charitable organizations			
5. Principal office address 1130 Ten Road Road, Suite D302			City No. Kingstown	State RI	Zip 02852	
6. LIST <u>all</u> officers (NAMES AND ADD	RESSES) ("X" BOX F	ORATIACHMENT)			
President Name			Vice-President Name			
Robert W. Moeller, I	Executive Trus	tee	MaryAnn T. Moeller, V	ice Executive	Trustee	
Street Address			Street Address			
129 Beechwood Drive			129 Beechwood Drive			
City Cranston	State RI	Zip 02921	City	State	Zip	
Secretary Name		UZ3Z1		RI	02921	
MaryAnn T. Moeller			Treasurer Name	Daniel J. Ryan		
Street Address				Street Address		
129 Beechwood Drive			15 Tall Pines Drive			
City	State	Zip	City	State	Zip	
Cranston	RI	02921	Barrington	RI	02806	
7. LIST <u>ALL</u> DIRECTORS ("X" BOX FOR ATTACK	(NAMES AND ADI		SLAND CORPORATIONS MUST LIS		1	
Director Name			Director Name	<u> Je 1909 projekte av 1997</u>	Ti Tirine ayar ku ugan tunu ti tu, titi geri eller	
Robert W. Moeller			MaryAnn T. Moeiler			
Street Address			Street Address			
129 Beechwood Drive		129 Beechwood Drive				
City	State	Zip	City	State	Zip	
Cranston	RI	02921	Cranston	RI	02921	
Director Name			Director Name	-		
Paul A. Ward, Jr.			Louis J. Rizzacasa			
Street Address 1130 Ten Rod Road,	Suite D302		Street Address 10004 157th Avenue	<u></u>		
City	State	Zip	City	State	Zip	
No. Kingstown	RI	02852	Howard Beach	NY	11414	
8. REGISTERED AGENT I						
			tany of State Changes require filing	Form 641		
			tary of State. Changes require filing ecretary, Assistant Secretary, Treasure		Representative, Receiver	
File Date Check No By:		FILED JUL 13 2015	Under penalty of perjury, this report, including any and that all statements co	accompanying so entained herein an	thedules and statement to true and correct.	
FOR SECRETARY OF S	TATE USE ONLY BY	495		Moeller	ive / Date	
Form No. 631	- 12 11		Print or Type Name of Office	er or Authorized Re	presentative	