



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. 000505989

2. Name of Corporation Children's Wish Group of RI

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 2346 POST ROAD

SUITE 102

City or Town: WARWICK

State: RI

Zip: 02886

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 ENGAGE IN ACTIVITIES AND RAISE FUNDS TO GRANT WISHES TO CHILDREN SUFFERING FROM LIFE-THREATENING DISEASES BETWEEN AGES 2 1/2 AND 18

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	Address
PRESIDENT	THEODORE TRAFTON	7 JENCKES STREET PROVIDENCE, RI 02906 USA
SECRETARY	DEBORAH VIVEIROS	36 WINTHROP STREET

		SEEKONK, MA 02771 USA
VICE PRESIDENT	PAULA IACONO	3 KRISTEN DRIVE NORTH PROVIDENCE, RI 02911 USA
DIRECTOR	DAVID PALLER	4 PIERCE COURT BARRINGTON, RI 02806 USA
DIRECTOR	ERNEST FRIZZLE	39 KRISTEN LANE NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	DIANNE THIBEAULT	240 NARRAGANSETT BAY AVENUE WARWICK, RI 02889 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**

ADLER POLLOCK & SHEEHAN P.C. ONE CITIZENS PLAZA, 8TH FLOOR PROVIDENCE , RI 02903

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

Signed this 16 Day of July, 2015 at 1:15:12 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 THEODORE TRAFTON
Signature of Authorized Person

Form No. 631
Revised 09/07