RI SOS Filing Number: 201574194250 Date: 08/18/2015 11:16 AM

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. 000533244

2. Name of Corporation Grace Farina Foundation for Leukemia and Lymphoma

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 1830 MINERAL SPRING AVENUE
City or Town: NORTH PROVIDENCE State: RI Zip: 02911 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 PROVIDE DIGNITY AND AID IN THE FINANCIAL ASSISTANCE OF PATIENTS AFFLICTED WITH DISEASES OF HEMATOLOGICAL MALIGNANCIES AND IN SCIENTIFIC RESEARCH OF DRUGS AND CLINICAL TRIALS OF TREATMENT PLANS OFFERED TO THOSE AFFLICTED AND TO RAISE PUBLIC AWARENESS OF THIS DISEASE

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
PRESIDENT	ANTHONY G FARINA JR.	1830 MINERAL SPRING AVENUE NORTH PROVIDENCE, RI 02911 USA

DIRECTOR	ANTHONY G. FARINA SR	1830 MINERAL SPRING AVE NORTH PROVIDENCE, RI 02911 USA
DIRECTOR	ANTHONY G FARINA JR	1830 MINERAL SPRING AVE NORTH PROVIDENCE, RI 02911
DIRECTOR	BRENDA DEL SIGNORE	1830 MINERAL SPRING AVE NORTH PROVIDENCE, RI 02911 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

MICHAEL L. LEPIZZERA, JR. ESQ. 117 METRO CENTER BOULEVARD SUITE 2001 WARWICK , RI 02886

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

Signed this 18 Day of August, 2015 at 11:18:13 AM 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 ANTHONY G. FARINA, JR., MD
Signature of Authorized Person

Form No. 631
Revised 09/07