



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. <b>58444</b>		2. Exact name of the Corporation <b>MILK FUND, INC.</b>			
3. State of Incorporation <b>RI</b>		4. Brief description of the character of business conducted in Rhode Island <b>CONDUCT AN ANNUAL APPEAL TO PROVIDE MILK TO NEEDY CHILDREN</b>			
5. Principal office address <b>9 STONE RIDGE DRIVE</b>		City <b>N. SMITHFIELD</b>	State <b>RI</b>	Zip <b>02896</b>	
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name <b>NANCY PHILLIPS</b>			Vice-President Name <b>DAVE RICHARDS</b>		
Street Address <b>325 DUNLAP STREET</b>			Street Address <b>985 PARK AVE.</b>		
City <b>WOODSOCKET</b>	State <b>RI</b>	Zip <b>02895</b>	City <b>WOODSOCKET</b>	State <b>RI</b>	Zip <b>02895</b>
Secretary Name <b>MICHAEL DARVEAU</b>			Treasurer Name <b>MICHAEL DARVEAU</b>		
Street Address <b>9 STONE RIDGE DR.</b>			Street Address <b>9 STONE RIDGE DR.</b>		
City <b>N. SMITHFIELD</b>	State <b>RI</b>	Zip <b>02896</b>	City <b>N. SMITHFIELD</b>	State <b>RI</b>	Zip <b>02896</b>
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS <u>MUST</u> LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name <b>BARRY HECKMILL</b>			Director Name <b>BITA GANDHI</b>		
Street Address <b>33 ROELKER DRIVE</b>			Street Address <b>800 CLIFTON ST.</b>		
City <b>EAST GREENWICH</b>	State <b>RI</b>	Zip <b>02818</b>	City <b>WOODSOCKET</b>	State <b>RI</b>	Zip <b>02895</b>
Director Name <b>NANCY PHILLIPS</b>			Director Name <b></b>		
Street Address <b>325 DUNLAP STREET</b>			Street Address <b></b>		
City <b>WOODSOCKET</b>	State <b>RI</b>	Zip <b>02895</b>	City <b></b>	State <b></b>	Zip <b></b>
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

File Date \_\_\_\_\_

Check No \_\_\_\_\_

By: \_\_\_\_\_

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FILED

DEC 02 2015

By 2162331

A.A.

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.

Signature of Officer or Authorized Representative

**SECRETARY TREASURER**

**MICHAEL R. DARVEAU**

Print or Type Name of Officer or Authorized Representative

Date

12/2/15

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