



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. 000051468

2. Name of Corporation RHODE ISLAND ORGAN DONOR AWARENESS COALITION, INC.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 413 HOOPER STREET

City or Town: TIVERTON

State: RI

Zip: 02878

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

PROMOTING PUBLIC AWARENESS REGARDING ORGAN DONATION

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	RUSSELL MAYNARD	661 PEARSE ROAD SWANSEA, MA 02777 USA
TREASURER	EUGENE RAPOSA	413 HOOPER ST TIVERTON, RI 02878 USA
SECRETARY	JENNIFER HOFFER	116 PERRY STREET

		DOUGLAS, MA 01516 USA
VICE PRESIDENT	LISA PAPPAS	299 CAPRON FARM RD WARWICK, RI 02886 USA
DIRECTOR	CARLEEN DESROCHERS	21 SPINNAKER WAY WESTPORT, MA 02790 USA
DIRECTOR	CHRISTINE KEARNS	55 FAIRMOUNT DR EAST GREENWICH, RI 02818 USA
DIRECTOR	KATHY FAHEY	14 INTENVALE RD SMITHFIELD , RI 02917 USA
DIRECTOR	DR STACI FISCHER	470 NORTH LANE BRISTOL, RI 02809 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**

JOHN ALBANESE 6 WESTMORELAND STREET NARRAGANSETT , RI 02882

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 December, 2015 at 5:39:26 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 EUGENE RAPOSA
Signature of Authorized Person

Form No. 631
Revised 09/07

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