



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. 000100233

2. Name of Corporation CHARIHO ROTARY CLUB FOUNDATION, INCORPORATED

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: C/O MERRILL K. MOONE
8A CANAL STREET

City or Town: WESTERLY State: RI Zip: 02891 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

SERVICE CLUB

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	FRANCIS XAVIER HOPKINS	222 BUCKEYE BROOK ROAD CHARLESTOWN, RI 02813 USA
TREASURER	SHERI MAJOR	1821 MATUNUCK SCHOOL HOUSE ROAD SOUTH KINGSTOWN, RI 02879 USA

SECRETARY	KIMBERLY KELLEY	20 BURDICKVILLE ROAD BRADFORD, RI 02808 USA
VICE PRESIDENT	ELIZABETH PASQUALINI	166 ROSS HILL ROAD CHARLESTOWN, RI 02813 USA
DIRECTOR	JEANNE ABATE	10 PARKWOOD DRIVE PAWCATUCK, CT 06379 USA
DIRECTOR	JEFF ALLEN	PO BOX 42 CAROLINA, RI 02812 USA
DIRECTOR	WILLIAM FLATLEY	22 ENTERPRISE TERRACE KINGSTON, RI 02881 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

MERRILL K. MOONE 8A CANAL STREET WESTERLY , RI 02891

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

Signed this 9 Day of December, 2015 at 3:12:28 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 FRANCIS X HOPKINS
Signature of Authorized Person

Form No. 631
Revised 09/07

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