



**State of Rhode Island and Providence Plantations  
Department of State - Business Services Division**

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:** 2016

Filing period: June 1 - June 30

Filing Fee: \$20.00 \*FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID Number		2. Exact name of the Corporation			
26738		Elizabeth P Hussey Memorial Nursing Scholarship Fund			
3. State of Incorporation		4. Brief description of the character of business conducted in Rhode Island			
RI		Expand educational opportunities for residents of Middletown in nursing			
5. Principal Office Address			City	State	Zip
281 Green End Ave			Middletown	RI	02842
6. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Victory Picard</b>			Vice-President Name <b>Leonard Silvia</b>		
Street Address <b>Girard Avenue</b>			Street Address <b>281 Green End Ave</b>		
City <b>Newport</b>	State <b>RI</b>	Zip <b>02840</b>	City <b>Middletown</b>	State <b>RI</b>	Zip <b>02842</b>
Secretary Name <b>Amy Ruggiero</b>			Treasurer Name <b>Prudence Silvia</b>		
Street Address <b>287 Green End Ave</b>			Street Address <b>281 Green End Ave</b>		
City <b>Middletown</b>	State <b>RI</b>	Zip <b>02842</b>	City <b>Middletown</b>	State <b>RI</b>	Zip <b>02842</b>
7. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>Victory Picard</b>			Director Name <b>Leonard Silvia</b>		
Street Address <b>Girard Avenue</b>			Street Address <b>281 Green End Ave</b>		
City <b>Newport</b>	State <b>RI</b>	Zip <b>02840</b>	City <b>Middletown</b>	State <b>RI</b>	Zip <b>02842</b>
Director Name <b>Prudence Silvia</b>			Director Name		
Street Address <b>281 Green End Ave</b>			Street Address		
City <b>Middletown</b>	State <b>RI</b>	Zip <b>02842</b>	City	State	Zip
8. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
<b>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.</b>					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>					
Name of Officer/Authorized Representative <b>Prudence Silvia</b>				Date <b>May 14, 2016</b>	
Signature of Officer/Authorized Representative <i>Prudence Silvia</i>					

**FILED**

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