



**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 **2016**

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>57990</b>		2. Exact name of the Corporation <b>The Tomorrow Fund</b>			
3. State of Incorporation <b>Rhode Island</b>		4. Brief description of the character of business conducted in Rhode Island <b>Support for children with cancer and pediatric oncology program at Hasbro Children's Hospital.</b>			
5. Principal office address <b>593 Eddy Street</b>		City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>	
<b>6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/></b>					
President Name <b>Lisa Abbenante</b>			Vice-President Name <b>Robert Markarian</b>		
Street Address <b>1751 Harkney Hill Road</b>			Street Address <b>15 River Run</b>		
City <b>Coventry</b>	State <b>RI</b>	Zip <b>02816</b>	City <b>East Greenwich</b>	State <b>RI</b>	Zip <b>02818</b>
Secretary Name <b>Karin Marzilli</b>			Treasurer Name <b>David Belhumeur</b>		
Street Address <b>114 Moccasin Trail</b>			Street Address <b>19 Ridgeland Drive</b>		
City <b>Cranston</b>	State <b>RI</b>	Zip <b>02921</b>	City <b>Cumberland</b>	State <b>RI</b>	Zip <b>02864</b>
<b>7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/></b>					
Director Name <b>Lisa Abbenante</b>			Director Name <b>Robert Markarian</b>		
Street Address <b>1751 Harkney Hill Road</b>			Street Address <b>15 River Run</b>		
City <b>Coventry</b>	State <b>RI</b>	Zip <b>02816</b>	City <b>East Greenwich</b>	State <b>RI</b>	Zip <b>02818</b>
Director Name <b>Karin Marzilli</b>			Director Name <b>David Belhumeur</b>		
Street Address <b>114 Moccasin Trail</b>			Street Address <b>19 Ridgeland Drive</b>		
City <b>Cranston</b>	State <b>RI</b>	Zip <b>02921</b>	City <b>Cumberland</b>	State <b>RI</b>	Zip <b>02864</b>
<b>8. REGISTERED AGENT IN RHODE ISLAND</b>					
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: \_\_\_\_\_

FOR SECRETARY OF STATE USE ONLY BY \_\_\_\_\_

**FILED**

MAY 27 2016

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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]* 5/16/16  
 Signature of Officer or Authorized Representative Date

**Lisa Abbenante, President**

Print or Type Name of Officer or Authorized Representative