



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

Foreign Non-Profit
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: 2016

1. Corporate ID No. 000085464

2. Name of Corporation DOROT FOUNDATION

3. State of Incorporation

State: NY

4. Corporate Address in Rhode Island

No. and Street: 401 ELMGROVE AVENUE

City or Town: PROVIDENCE

State: RI Zip: 02906 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

TO ACQUIRE OR RECEIVE IN ANY MANNER AND TO MANITAIN AND ADMINISTER ANY PROPERTY OF WHATSOEVER NATURE, REAL, PERSONAL OR MIXED.

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	JEANE UNGERLEIDER	C/O MARKS PANETH & SHRON, 685 THIRD AVENUE NEW YORK, NY 10017 USA
TREASURER	STEVEN C. BAUM	401 ELMGROVE AVENUE PROVIDENCE, RI 02906 USA
VICE PRESIDENT	MICHAEL HILL	401 ELMGROVE AVENUE PROVIDENCE, RI 02906 USA
DIRECTOR	SARA E. NATHAN	C/O MARKS PANETH & SHRON, 685 THIRD AVE

		NEW YORK, NY 10017 USA
DIRECTOR	SIMEON SPRINGER	C/O MARKS PANETH & SHRON NEW YORK, NY 10017 USA
DIRECTOR	STEVEN C BAUM	C/O MARKS PANETH & SHRON, 685 THIRD AVENUE NEW YORK, NY 10017 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**

MICHAEL HILL 401 ELMGROVE AVENUE PROVIDENCE , RI 02906

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

Signed this 1 Day of June, 2016 at 8:56:03 AM 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 MARSHA G. RICE
Signature of Authorized Person

Form No. 631
Revised 09/07

© 2007 - 2016 State of Rhode Island and Providence Plantations
All Rights Reserved