

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 2016

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.

\$25.00.				
ANNUAL REPORT YEAR: 201	<u>16</u>			
1. Corporate ID No. 00002	<u>26580</u>			
2. Name of Corporation CHRIS ANTONELLI NEW ENGLAND SCHOLARSHIP FUND				
3. State of Incorporation				
State: <u>RI</u>				
4. Corporate Address in Rhoo	de Island			
	TRY DRIVE ERLAND State:	RI Zip: <u>02864</u> p puntry: USA		
5. Foreign Corporation. Enter	Principal Office Address	JUN 1 3 2016 🗆		
No. and Street:				
City or Town: State: Zip	c Country:	8V 1084		
6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island				
TO PROVIDE ASSISTANCE TO ANY CHARITABLE, EDUCATIONAL, OR INDIVIDUALS WITH SPECIAL EMPHASIS ON RETARDED CITIZENS.				
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 If officers and/or directors have been elected, the title incorporator is no longer applicable; please delete THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3).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	RUBY ANTONELLI			

		2710 VERMONT 22 A BRIDPORT, VT 05734 USA
DIRECTOR	AL MADDALENA	53 ROXBURY COURT NIANTIC, CT 06357 USA
Treasurer	Ernest Francis LaPlante	1 Ventry Drive Cumberland, RI 02864 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

ERNEST LAPLANTE ONE VENTRY DRIVE CUMBERLAND, RI 02864

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

Filer's Contact Information

(Enter a contact name, mailing address and email.)

Contact Name: <u>ERNEST LAPLANTE</u>

Business Name:

No. and Street: ONE VENTRY DRIVE

City or Town: **CUMBERLAND**

State: <u>RI</u> Zip: <u>02864</u>

Country: USA

Contact Phone: ext:

Contact Email: <u>laplante0489@verizon.net</u>

Please provide an email address to receive an expedited response from us if the filing is rejected for any reason. If no email address is provided, we will respond by mail.

Signed this 1 Day of June, 2016 at 4:26:22 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 Ernest LaPlante

Signature of Authorized Person

Make Corrections

Accept

Form No. 631 Revised 09/07

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Names and addresses of Officers and Directors of Chris Antonelli N R Scholarship Fund As per section #7

<u>President</u>	<u>Directors</u>
Ruby Antonelli	James Walsh
2710 Vermont 22 A	14 Whitehall Road
Bridport, VT 05734	Hooksett, NH 03106

Vice President

Charles Cavallaro	Douglas Larrabee
6 Hebdeen Street	11 West Chestnut Street
Johnston, RI 02919	Mechanic Falls, ME 04256

Secretary

Patricia Maddalena	Alfred Maddalena
53 Roxbury Court	53 Roxbury Court
Niantic, CT 06357-1328	Niantic, CT 06357-1328

Treasurer/Corresponding Secretary

Ernest LaPlante
1 Ventry Drive

Cumberland, RI 02864-3810