



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: 2016

1. Corporate ID No. 000695451

2. Name of Corporation Rare Disease United Foundation

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 46 KENTON AVENUE

City or Town: RUMFORD

State: RI Zip: 02916 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

THE MISSION OF THE RIRDF IS TO BENEFIT THOSE INDIVIDUALS AND THEIR FAMILIES LIVING IN the United States WITH A RARE DISEASE BY: PROVIDING INFORMATION AND SUPPORT, RAISING AWARENESS, ADVOCATING EDUCATING BOTH THE MEDICAL COMMUNITY AND THE GENERAL PUBLIC, RAISING FUNDS FOR RESEARCH RESTATEMENT OF PURPOSE.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	PATRICIA ELAINE WELTIN	46 KENTON AVENUE

		RUMFORD, RI 02916 USA
VICE PRESIDENT	ROBERT SULLIVAN	82 LINDSAY LANE NORTH KINGSTOWN, RI 02916 USA
DIRECTOR	GALIA KARASHCHUK	80 WHIPPLE HIGHWAY BARRINGTON, RI 02806 USA
DIRECTOR	ROBERT MCCARTHY	735 CONESTOGO ROAD BRYN MAWR, PA 19010 USA
DIRECTOR	PAUL CARUSO	55 FRUIT STREET BOSTON, MA 02114 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

PATRICIA WELTIN 46 KENTON AVENUE RUMFORD , RI 02916

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

Signed this 15 Day of June, 2016 at 10:59:05 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 PATRICIA WELTIN
Signature of Authorized Person

Form No. 631
Revised 09/07