



**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.** 000533244

**2. Name of Corporation** Grace Farina Foundation for Leukemia and Lymphoma

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 1830 MINERAL SPRING AVENUE

City or Town: NORTH PROVIDENCE

State: RI Zip: 02911 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 PROVIDE DIGNITY AND AID IN THE FINANCIAL ASSISTANCE OF PATIENTS  
AFFLICTED WITH DISEASES OF HEMATOLOGICAL MALIGNANCIES AND IN  
SCIENTIFIC RESEARCH OF DRUGS AND CLINICAL TRIALS OF TREATMENT PLANS  
OFFERED TO THOSE AFFLICTED AND TO RAISE PUBLIC AWARENESS OF THIS DISEASE

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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
PRESIDENT	ANTHONY G FARINA JR.	1830 MINERAL SPRING AVENUE NORTH PROVIDENCE, RI 02911 USA

DIRECTOR	ANTHONY G. FARINA SR	1830 MINERAL SPRING AVE NORTH PROVIDENCE, RI 02911 USA
DIRECTOR	ANTHONY G FARINA JR	1830 MINERAL SPRING AVE NORTH PROVIDENCE, RI 02911
DIRECTOR	BRENDA DEL SIGNORE	1830 MINERAL SPRING AVE NORTH PROVIDENCE, RI 02911 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 L. LEPIZZERA, JR. ESQ. 117 METRO CENTER BOULEVARD SUITE 2001 WARWICK , RI 02886

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

**Signed this 26 Day of July, 2016 at 4:20:50 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 MICHAEL J. LEPIZZERA, JR.  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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