



**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. 000616325

2. Name of Corporation National Grace Foundation

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 115 CRESTHILL DRIVE

City or Town: EAST GREENWICH

State: RI Zip: 02818 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

PROVIDING ASSISTANCE, ADVICE AND CONSULTING SERVICES TO FAMILIES AND CHILDREN DEALING WITH CANCER AND RELATED SERVICES

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
OTHER OFFICER	ANTHONY GALLONIO	115 CRESTHILL DR EAST GREENWICH, RI 02818 UNI
VICE PRESIDENT	ANTHONY GALLONIO	115 CRESTHILL DR EAST GREENWICH, RI 02818 USA

DIRECTOR	SUSAN FARNUM	2631 HARKNEY HILL RD COVENTRY, RI 02874 USA
DIRECTOR	CHRISTINE WOODBINE	1175 BOSTON NECK RD NARRAGANSETT, RI 02882 USA
DIRECTOR	ALAN CENTAZZO	31A WATerview DR SMITHFIELD, RI 02917 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

ANTHONY GALLONIO 15 CRESTHILL DRIVE EAST GREENWICH, RI 02818

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

Signed this 22 Day of December, 2016 at 8:39:17 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 ANTHONY GALLONIO
Signature of Authorized Person

Form No. 631
Revised 09/07

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