



State of Rhode Island and Providence Plantations  
Department of State - Business Services Division

Annual Report for the year:  
Non-Profit Corporation

2017

- Filing period: June 1 - June 30  
→ Filing Fee: \$20.00  
→ Penalty: Additional \$25.00 fee if form is not filed by July 30.

1. Entity ID Number <b>135478</b>		2. Exact name of the Corporation <b>Herma Moeller Procopiadi Foundation</b>			
3. State of Incorporation <b>Rhode Island</b>		4. Brief description of the character of business conducted in Rhode Island <b>Private funding for other charitable organizations</b>			
5. Principal Office Address <b>1130 Ten Rod Road, Suite D302</b>		City <b>No. Kingstown</b>		State <b>RI</b>	Zip <b>02852</b>
6. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Robert W Moeller, Executive Trustee</b>			Vice-President Name <b>MaryAnn T Moeller, Vice Executive Trustee</b>		
Street Address <b>129 Beechwood Drive</b>			Street Address <b>129 Beechwood Drive</b>		
City <b>Cranston</b>	State <b>RI</b>	Zip <b>02921</b>	City <b>Cranston</b>	State <b>RI</b>	Zip <b>02921</b>
Secretary Name <b>MaryAnn T Moeller</b>			Treasurer Name		
Street Address <b>129 Beechwood Drive</b>			Street Address		
City <b>Cranston</b>	State <b>RI</b>	Zip <b>02921</b>	City	State	Zip
7. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>Robert W Moeller</b>			Director Name <b>MaryAnn T Moeller</b>		
Street Address <b>129 Beechwood Drive</b>			Street Address <b>129 Beechwood Drive</b>		
City <b>Cranston</b>	State <b>RI</b>	Zip <b>02921</b>	City <b>Cranston</b>	State <b>RI</b>	Zip <b>02921</b>
Director Name <b>Paul A Ward, Jr</b>			Director Name		
Street Address <b>1130 Ten Rod Road, Suite D302</b>			Street Address		
City <b>No. Kingstown</b>	State <b>RI</b>	Zip <b>02852</b>	City	State	Zip
8. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
<b>Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.</b>					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>					
Name of Officer/Authorized Representative <b>Mary Ann Moeller</b>				Date <b>6-1-2017</b>	
Signature of Officer/Authorized Representative <i>Mary Ann Moeller</i>					

MAIL TO:  
Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: www.sos.ri.gov

**FILED**

**JUN 05 2017**

BY

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FORM 631 - Revised: 02/2017