



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

Annual Report for the year: **2017**

Non-Profit Corporation

- 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 1015207		2. Exact name of the Corporation The Heather Abbott Foundation			
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island See attached.			
4. NAICS Code 624190 - Other Individual an					
6. Principal Office Address 181 Bellevue Ave. #407			City Newport	State RI	Zip 02840
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Heather Abbott			Vice-President Name Frank Scanlan		
Street Address 1655 Valley Oak Rd			Street Address 8602 Powder Horn Road		
City John's Island	State SC	Zip 29455	City West Springfield	State VA	Zip 22152
Secretary Name James Banks			Treasurer Name James Banks		
Street Address 26 West Passage Drive			Street Address 26 West Passage Drive		
City Portsmouth	State RI	Zip 02871	City Portsmouth	State RI	Zip 02871
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input checked="" type="checkbox"/>					
Director Name Heather Abbott			Director Name James Banks		
Street Address 1655 Valley Oak Rd			Street Address 26 West Passage Drive		
City John's Island	State SC	Zip 29455	City Portsmouth	State RI	Zip 02871
Director Name Malina Jacobowitz			Director Name Frank Scanlan		
Street Address 6612 Nettles Lane, Unit C			Street Address 8602 Powder Horn Road		
City Alexandria	State VA	Zip 22315	City West Springfield	State VA	Zip 22152
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
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.					
<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 Heather Abbott, President					Date 6/19/17
Signature of Officer/Authorized Representative 					

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 22 2017
 BY 108006352

Attachment to
2017 Rhode Island Non-Profit Annual Report

The Heather Abbott Foundation
Corporate ID # 1015207

3. The specific purpose or purposes for which the corporation is organized are:

The Corporation shall be operated exclusively for charitable purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986, as now in effect or as may hereafter be amended (“the Code”). More specifically, the Corporation shall grant specialized prosthetic devices, which are not covered under health insurance, to victims of traumatic incidents, who experience limb loss.

No. 7 Additional Directors:

NAME	ADDRESS
Cynthia Lima, Chairman Board of Directors	143 Gardenia Way Franklin, TN