



**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:** 2018

**1. Corporate ID No.** 001669845

**2. Name of Corporation** The John F. Montanaro III Memorial Foundation

**3. State of Incorporation**

State: RI

**ARTICLE III**

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code

6

813990

**4. Corporate Address in Rhode Island**

No. and Street: 252 HAVERHILL AVENUE

City or Town: NORTH KINGSTOWN

State: RI

Zip: 02852

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 JOHN F. MONTANARO III MEMORIAL FOUNDATION IS A NONPROFIT CORPORATION AND SHALL OPERATE EXCLUSIVELY FOR EDUCATIONAL, CHARITABLE AND THE PREVENTION OF CRUELTY TO ANIMALS PURPOSES WITHIN THE MEANING OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE.

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	DEBORAH MARIE MONTANARO	252 HAVERHILL AVENUE NORTH KINGSTOWN, RI 02852 USA
TREASURER	JASON LEON MONTANARO	252 HAVERHILL AVENUE NORTH KINGSTOWN, RI 02852 USA
SECRETARY	LENORE MARIE MONTANARO	252 HAVERHILL AVENUE NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	JANICE ANN SILVIA	4 CHARDWOOD DRIVE COVENTRY, RI 02816 USA
DIRECTOR	JOHN FRANK MONTANARO JR.	252 HAVERHILL AVENUE NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	MARIE DOLORAS BOSSIAN	102 WEEDEN STREET EAST GREENWICH, RI 02852 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**

DEBORAH M. MONTANARO 252 HAVERHILL AVENUE NORTH KINGSTOWN , RI 02852

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

**Signed this 5 Day of May, 2018 at 1:50:48 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 LENORE MARIE MONTANARO  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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