



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

Matthew A. Brown, Secretary of State  
Corporations Division  
148 W. River Street, Providence, RI 02904-2615  
401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: June 1 - June 30 • Filing Fee: \$20.00 \*

\* 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.

1. Corporate ID No. 124424 2. Name of Corporation PAUL DEZIEL MEMORIAL SCHOLARSHIP FUND, INC.  
3. State of Incorporation RHODE ISLAND 4. Corporate address in Rhode Island - Street Address 301 WALNUT HILL ROAD City WOONSOCKET Zip 02895  
5. Foreign corporation: Enter principal office address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

6. Brief Description of the character of the affairs which are actually conducted in Rhode Island

TO PROVIDE SCHOLARSHIP FUNDS FOR QUALIFIED INDIVIDUAL STUDENTS BUY AND THROUGH FUNDRAISING EVENTS

7. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Ronald R. Deziel Vice President Name Tina Giguere / Emile Giguere  
Street Address 301 Walnut Hill Rd Street Address 17 Rocco Drive  
City Woonsocket State RI Zip 02895 City Blackstone State MA Zip 01504  
Secretary Name Stephen M. Casey Treasurer Name Debra D. Hunt  
Street Address 625 Park Ave 2F Street Address 625 Park Ave 2F  
City Woonsocket State RI Zip 02895 City Woonsocket State RI Zip 02895

8. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23

Director Name Ronald R. Deziel Director Name Tina Giguere / Emile Giguere  
Street Address 625 Park Ave 2F Street Address 17 Rocco Drive  
City Woonsocket State RI Zip 02895 City Blackstone State MA Zip 01504  
Director Name Stephen M. Casey Director Name Debra D. Hunt  
Street Address 625 Park Ave 2F Street Address 625 Park Ave 2F  
City Woonsocket State RI Zip 02895 City Woonsocket State RI Zip 02895

9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78.

Agent Name Stephen M. Casey Address W  
Address 625 Park Ave Woon City Woonsocket State RI Zip 02895

This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



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\*124424 DNR 06/16/06 01:12:35 PM\*  
**FILED**  
File Date JUN 26 2006  
Check No. By 002102499  
FOR SECRETARY OF STATE USE ONLY

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.

Signature of Officer Stephen M. Casey Date 6-15-06  
Print or Type Name of Officer Stephen M. Casey  
Title of Officer Secretary



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

Matthew A. Brown, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: June 1 - June 30 • Filing Fee: \$20.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 124424  
2. Name of Corporation PAUL DEZIEL MEMORIAL SCHOLARSHIP FUND, INC.  
3. State of Incorporation Rhode Island  
4. Corporate address in Rhode Island - Street Address 301 Walnut Hill Rd.  
5. Foreign corporation: Enter principal office address City Woonsocket State RI Zip 01504

6. Brief Description of the character of the affairs which are actually conducted in Rhode Island

To provide Scholarship funds for qualified individual students buy and through fundraising events

7. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Ron Deziel  
Street Address 301 Walnut Hill Rd.  
City Woonsocket State RI Zip 02895  
Vice President Name Tina Giguere and Emile Giguere  
Street Address 17 Rocco Dr.  
City Blackstone State MA Zip 01504  
Secretary Name Stephen Casey  
Street Address 625 Park Ave., 2F  
City Woonsocket State RI Zip 02895  
Treasurer Name Tina Giguere  
Street Address 17 Rocco Dr.  
City Blackstone State MA Zip 01504

8. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS  
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23

Director Name Ron Deziel  
Street Address 301 Walnut Hill Rd.  
City Woonsocket State RI Zip 02895  
Director Name Tina Giguere  
Street Address 17 Rocco Dr.  
City Blackstone State MA Zip 01504  
Director Name Debra Hunt  
Street Address 625 Park Ave., #2F  
City Woonsocket State RI Zip 02895

9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-23

Agent Name Charles M. Vacca, Jr., Esquire  
Address One Cumberland Plaza  
City Woonsocket State RI Zip 02895

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



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FILED

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.

Signature of Officer Stephen M Casey Date 7-2-04  
Print or Type Name of Officer Stephen M Casey  
Title of Officer Secretary

File Date

SEP 07 2004

Check No.

By KMC C43607

By

FOR SECRETARY OF STATE USE ONLY

Form 631 Rev. 6/02



STATE OF RHODE ISLAND  
AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State

Matthew A. Brown, Secretary of State  
Corporations Division  
100 North Main Street, Providence, RI 02903-1335  
401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

Filing Period: June 1 - June 30 • Filing Fee: \$20.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 124424		2. Name of Corporation PAUL DEZIEL MEMORIAL SCHOLARSHIP FUND, INC.			
3. State of Incorporation RHODE ISLAND	4. Corporate address in Rhode Island - Street Address 301 Walnut Hill Rd.		City Woonsocket	Zip RI	
5. Foreign corporation. Enter principal office address		City	State	Zip	
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island. TO PROVIDE SCHOLARSHIP FUNDS FOR QUALIFIED INDIVIDUAL STUDENTS BUY AND THROUGH FUNDRAISING EVENTS					
7. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Ron Deziel		Vice President Name Tina Giguere and Emile Giguere			
Street Address 301 Walnut Hill Rd.		Street Address 17 Rocco Drive			
City Woonsocket	State RI	Zip 02895	City Blackstone	State MA	Zip 01504
Secretary Name Stephen Casey		Treasurer Name Debra Hunt			
Street Address 625 Park Ave., 2F		Street Address 625 Park Ave., #2F			
City Woonsocket	State RI	Zip 02895	City Woonsocket	State RI	Zip 02895
8. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN THE SPACES BEFORE USING ATTACHMENTS THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23					
Director Name Ron Deziel		Director Name Tina Giguere			
Street Address 301 Walnut Hill Rd..		Street Address 17 Rocco Drive			
City Woonsocket	State RI	Zip 02895	City Blackstone	State MA	Zip 01504
Director Name Debra Hunt		Director Name			
Street Address 625 Park Ave., #2F		Street Address			
City Woonsocket	State RI	Zip 02895	City	State	Zip
9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78					
Agent Name CHARLES M. VACCA, JR. ESQ.		Address			
Address 1826 PARK AVENUE One Cumberland Plaza, 3d floor		City WOONSOCKET	Zip 02895		

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 1 2 4 4 2 4 \*

FILED

File Date SEP 07 2004

Check No. By EMC C43607

By  
FOR SECRETARY OF STATE USE ONLY

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.

Signature of Officer Stephen M. Casey Date 3-16-04

Print or Type Name of Officer Stephen M. Casey

Title of Officer Secretary