



**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: 2019

1. Corporate ID No. 000849346

2. Name of Corporation BRISTOL ROTARY CHARITIES 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

813211

4. Corporate Address in Rhode Island

No. and Street: P.O.BOX 469
City or Town: BRISTOL State: RI Zip: 02809 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

CHARITABLE ACTIVITIES, SPECIFICALLY BUT NOT LIMITED TO HELPING AND FEEDING THE POOR, SUPPORTING LOCAL EDUCATION PROGRAMS, ASSISTING THE ELDERLY AND INCAPACITATED AND, IN GENERAL, FOCUSING ON A VARIETY OF CHARITABLE PROGRAMS FOR THE TOWN OF BRISTOL

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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 First, Middle, Last, Suffix | Address Address, City or Town, State, Zip Code, Country |
|----------------|---|---|
| PRESIDENT | BRUCE H. COX | 35 SUNSET DRIVE TIVERTON , RI 01878 USA |
| TREASURER | JACQUES O. DE LABRY | 353 SPINNAKER LANE BRISTOL, RI 02809 USA |
| SECRETARY | SCOTT PICKERING | 70 BYRON AVE RUMFORD, RI 02916 USA |
| DIRECTOR | MICHELLE HUGHES | 654 METACOM AVE WARREN, RI 02885 USA |
| DIRECTOR | MARY JO FIDALGO-TAVARES | 17 JESSICA DRIVE BRISTOL, RI 02809 USA |
| DIRECTOR | SCOTT PICKERING | 70 BYRON AVE. RUMFORD, RI 02916 USA |
| DIRECTOR | PAUL LAFLEUR | 149 FATIMA DRIVE BRISTOL, RI 02809 USA |
| VICE-PRESIDENT | MARY JO FIDALGO-TAVARES | 17 JESSICA DRIVE BRISTOL, RI 02809 USA |
| DIRECTOR | BRUCE COX | 35 SUNSET DRIVE TIVERTON, RI 01878 USA |
| DIRECTOR | JACQUES DELABRY | 353 SPINAKER DRIVE BRISTOL, RI 02809 USA |
| DIRECTOR | ANGELA CABRAL | 11 SANDY RD BRISTOL, RI 02809 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**

JACQUES O. DELABRY 353 SPINNAKER LANE BRISTOL , RI 02809

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

Signed this 4 Day of June, 2019 at 2:37:06 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 JACQUES DE LABRY
Signature of Authorized Person

