



**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.** 001683526

**2. Name of Corporation** RIIAHF INC.

**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

813319

**4. Corporate Address in Rhode Island**

No. and Street: 300 CENTERVILLE ROAD  
SUMMIT EAST, SUITE 330

City or Town: WARWICK

State: RI

Zip: 02886

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**

TO HONOR INDIVIDUALS WHO HAVE ACCOMPLISHED ACHIEVEMENTS IN THE FIELD OF SPORTS, THE ARTS, EDUCATION, BUSINESS AND GOVERNMENT, AWARD SCHOLARSHIPS AND ALL OTHER LAWFUL PURPOSES.

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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
INCORPORATOR	THOMAS A. TARRO III	300 CENTERVILLE ROAD SUMMIT EAST SUITE 330 WARWICK, RI 02886 USA
DIRECTOR	JOHN DELUCA	23 MANHATTAN ST. PROVIDENCE, RI 02904 USA
DIRECTOR	MICHAEL INTEGLIA	220 SOUTH MAIN STREET PROVIDENCE, RI 02903 USA
DIRECTOR	PETER PALMISCIANO	45 CLIFFSIDE DRIVE CRANSTON, RI 02920 USA
DIRECTOR	EDWARD PASCARELLA	67 BROWN AVE. JOHNSTON, RI 02919 USA
DIRECTOR	JOSEPH ROCCO	53 LAKE STREET REHOBOTH, MA 02769 USA
DIRECTOR	ROBERT RODIO	1611 STONY LANE NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	ANGELO ROTELLA	4 POND VIEW COURT SMITHFIELD, RI 02917 USA
DIRECTOR	SALVATORE SPAGNOLI	12 FLORAL AVE. NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	THOMAS A. TARRO III	300 CENTERVILLE ROAD SUMMIT EAST SUITE 330 WARWICK, RI 02886 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**

THOMAS A. TARRO III, ESQ. 300 CENTERVILLE ROAD SUMMIT EAST SUITE 330 WARWICK , RI  
02886

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

**Signed this 12 Day of June, 2019 at 3:17:00 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 THOMAS A. TARRO, III  
Signature of Authorized Person

Form No. 631  
Revised 09/07

