


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

 Annual Report for the year: **2019**
 Non-Profit Corporation

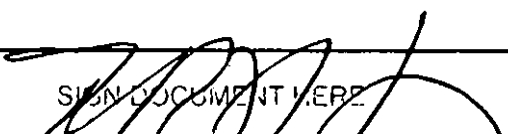
- Filing period: June 1 - June 30
 → Filing Fee: \$20.00
 → Penalty: Additional \$25.00 fee if form is not filed by July 30.

FILED

JUN 20 2019

BY

baos

1. Entity ID Number 001674707		2. Exact name of the Corporation Rotary Club of Scituate Rhode Island Foundation, Inc.			
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island Community fund raising and support of projects to better society and the local community.			
4. NAICS Code 813219 - Other Grantmaking &					
6. Principal Office Address P O Box 461		City North Scituate		State RI	Zip 02857
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Colleen Rose			Vice-President Name Sarah Malley		
Street Address Rockland Road			Street Address 69 Money Hill Road		
City North Scituate	State RI	Zip 02857	City Chepachet	State RI	Zip
Secretary Name Lynn Dubois02814			Treasurer Name William Vangel, Jr		
Street Address Snake Hill Road			Street Address 137 Foster Center Road		
City North Scituate	State RI	Zip 02857	City Foster	State RI	Zip 2825
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 Lola Smith			Director Name Micheline Lombardi		
Street Address Elmdale Road			Street Address Central Pike		
City North Scituate	State RI	Zip 02857	City North Scituate	State RI	Zip 02857
Director Name Larry O'Toole			Director Name Jenifer Huff		
Street Address 11 St. Mary's Road			Street Address Franklin Road		
City North Scituate	State RI	Zip 02857	City Foster	State RI	Zip 02825
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 William R. Vangel, Jr				Date 6/17/19	
Signature of Officer/Authorized Representative 					

The Rotary Club of Scituate Rhode Island Foundation, Inc.

Additional Board Member

Sharon Johnson

Danielson Pike

North Scituate RI 02857

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#1674707