State of Rhode Island
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: 2020

1. Corporate ID No. 001679697

2. Name of Corporation The Gianna Cirella Memorial Fund

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

813211

4. Corporate Address in Rhode Island

No. and Street: 16 GORTON LAKE BOULEVARD
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

THE FOUNDATION IS TO BE A NON-PROFIT ORGANIZATION TO HONOR THE LIFE OF GIANNA CIRELLA WHO PASSED AWAY SUDDENLY AT THE AGE OF 16 AFTER A BRIEF BOUT WITH PNEUMONIA AND SEPSIS. GIANNA WAS A JUNIOR AT TOLL GATE HIGH SCHOOL IN WARWICK, A GOALIE ON THE SOCCER TEAM AND A BRIGHT STUDENT WHO HAD ALREADY SET HER EYES ON ATTENDING COLLEGE AND MAKING A DIFFERENCE IN THE WORLD, STUDYING PHYSICAL THERAPY/SPORTS MEDICINE. WHEN GIANNA SUDDENLY BECAME ILL, HER FAMILY ONLY KNEW THAT SEPSIS WAS

DIFFICULT TO TREAT. AS HER PARENTS GAINED INFORMATION FROM HER TEAM OF DOCTORS AND BEGAN THEIR OWN RESEARCH, THEY DISCOVERED THERE IS A BREAKDOWN IN RESEARCH AND KNOWLEDGE WHEN IT COMES TO TREATING SEPSIS. THE MEMORIAL FUND HAS BEEN ESTABLISHED TO PROVIDE ASSISTANCE TO CHILDREN AND THEIR FAMILIES WHO HAVE BEEN AFFECTED BY THIS DISEASE AS WELL AS PROVIDING SCHOLARSHIP MONEY FOR PLAYERS OF THE SPORT SHE LOVED.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
DIRECTOR	TARA CIRELLA	16 GORTON LAKE BLVD WARWICK, RI 02886 USA
DIRECTOR	CHRISTINE ELLINGWOOD	4 TIVOLI CT WARWICK, RI 02886 USA
DIRECTOR	RACHEL CIRELLA	706 TEN ROD RD. NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	STANLEY CIRELLA	16 GORTON LAKE BLVD 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

TARA CIRELLA 16 GORTON LAKE BOULEVARD 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 19 Day of January, 2021 at 7:52:46 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 TONYA BUFFI
Signature of Authorized Person

Form No. 631
Revised 09/07

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