



**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: 2021

1. Corporate ID No. 001671154

2. Name of Corporation JAMES D. RIELLY FOUNDATION, 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

4. Principal Office Address

No. and Street: 21 SANDY LANE

City or Town: BRISTOL

State: RI

Zip: 02809-4556

Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

5. Brief Description of the Character of the Affairs Conducted in Rhode Island

CONDUCT A CHARITABLE GIVING AND BENEVOLENT ASSISTANCE PROGRAM TO ASSIST MILITARY VETERANS AND UNDERPRIVILEGED FAMILIES IN NEED.

6. Names and Addresses of the Officers and Directors:

All Directors and Officers must be listed individually. The number of DIRECTORS of a Rhode Island Corporation shall not be less than 3.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	MICHAEL RIELLY	21 SANDY LANE BRISTOL, RI 02809 USA
TREASURER	PATRICIA FERRICK	21 SANDY LANE BRISTOL, RI 02809 US
SECRETARY	PATRICIA FERRICK	21 SANDY LANE BRISTOL, RI 02809 US
DIRECTOR	DAVID SCARPINO	932 HOPE STREET BRISTOL, RI 02809 USA
DIRECTOR	LAURA SCARPINO	932 HOPE STREET BRISTOL, RI 02809 USA
DIRECTOR	LORI CRUZ	2 ROSLYN AVENUE BRISTOL, RI 02809 US
DIRECTOR	JENNIFER MANCIERI	14 BROADCOMMON ROAD BRISTOL, RI 02809 US
DIRECTOR	JODI LEFFINGWELL	P.O. BOX 603 BRISTOL, RI 02809 US
DIRECTOR	PAUL VOLLARO	3 JEFFERSON LANE BRISTOL, RI 02809 US
DIRECTOR	JUDITH SQUIRES	9 TOBIN DRIVE BRISTOL, RI 02809 US
DIRECTOR	RAYONA CLEMENS	2 ROSLYN AVENUE BRISTOL, RI 02809 US
DIRECTOR	MICHAEL HOFFMAN	316 STATE STREET BRISTOL, RI 02809 USA

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

MICHAEL J. RIELLY 21 SANDY LANE BRISTOL , RI 02809

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

Signed this 26 Day of May, 2021 at 12:09:17 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 MICHAEL RIELLY
Signature of Authorized Person

Form No. 631
Revised 09/07