



State of Rhode Island  
**Department of State - Business Services Division**

**Annual Report for the year: 2021**

**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**

JUL 21 2021  
 BY *[Signature]*

1. Entity ID Number <b>796951</b>		2. Exact name of the Corporation <b>Vincenzo Nigro Memorial Fund</b>			
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island Support and conduct programs that provide assistance to needy individuals in Rhode Island.			
4. NAICS Code 624190 - Other Individual and Fa					
6. Principal Office Address 26 Horne Drive		City Westerly	State RI	Zip 02891	
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Linda Keegan</b>			Vice-President Name <b>Diana Zerbarini</b>		
Street Address <b>26 Horne Drive</b>			Street Address <b>27 Horne Drive</b>		
City <b>Westerly</b>	State <b>RI</b>	Zip <b>02891</b>	City <b>Westerly</b>	State <b>RI</b>	Zip <b>02891</b>
Secretary Name <b>Abiageal Keegan</b>			Treasurer Name <b>John Rafferty</b>		
Street Address <b>26 Horne Drive</b>			Street Address <b>9 Sesame Street</b>		
City <b>Westerly</b>	State <b>RI</b>	Zip <b>02891</b>	City <b>Westerly</b>	State <b>RI</b>	Zip <b>02891</b>
8. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>Linda Keegan</b>			Director Name <b>John Rafferty</b>		
Street Address <b>26 Horne Drive</b>			Street Address <b>9 Sesame Street</b>		
City <b>Westerly</b>	State <b>RI</b>	Zip <b>02891</b>	City <b>Westerly</b>	State <b>RI</b>	Zip <b>02891</b>
Director Name <b>Diana Zerbarini</b>			Director Name <b>Abiageal Keegan</b>		
Street Address <b>27 Horne Drive</b>			Street Address <b>26 Horne Drive</b>		
City <b>Westerly</b>	State <b>RI</b>	Zip <b>02891</b>	City <b>Westerly</b>	State <b>RI</b>	Zip <b>02891</b>
9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641.					
<b>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.</b>					
<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 <b>Linda Keegan</b>				Date <b>7/4/21</b>	
Signature of Officer/Authorized Representative <i>Linda Keegan</i>					

MAIL TO:  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov