



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2022

Non-Profit Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

FILED

APR 25 2022

BY

1. Entity ID Number 000030068		2. Exact name of the Corporation The Rhode Island FFA Foundation, Inc			
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island Support activities of secondary education students in agricultural education			
4. NAICS Code 611110 - Elementary and Seco					
6. Principal Office Address 65 Wilde Field Dr			City Warwick	State RI	Zip 02889
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Gwynne Millar			Vice-President Name Dan Flynn		
Street Address 32 Hillsdale Rd			Street Address 679 Great Rd		
City West Kingston	State RI	Zip 02892	City Lincoln	State RI	Zip 02865
Secretary Name Anthony Mallilo			Treasurer Name James Owen		
Street Address 65 Wilde Field Dr			Street Address 10 David Drive		
City Warwick	State RI	Zip 02889	City Johnston	State RI	Zip 02919
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>					
Director Name Dana Millar			Director Name Aaron Gathen		
Street Address 32 Hillsdale Rd			Street Address 140 New London Tpk		
City West Kingston	State RI	Zip 02892	City Richmond	State RI	Zip 02898
Director Name Norm Hammond			Director Name		
Street Address 25 Old Hartford Pike			Street Address		
City N. Scituate	State RI	Zip 02857	City	State	Zip
9. The Registered Agent information of record with the RI Department of State is accurate. 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 Anthony Mallilo, Secretary, RIFFA Foundation, Inc				Date 1/25/2022	
Signature of Officer/Authorized Representative 					

MAIL TO:
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