



**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: February 1 - May 1

*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:** 2023

**1. Corporate ID No.** 000030370

**2. Name of Corporation** RHODE ISLAND INTERSCHOLASTIC INJURY 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  
611110

**4. Principal Office Address**

No. and Street: 262 ABBOTT RUN VALLEY ROAD

City or Town: CUMBERLAND

State: RI Zip: 02864 Country: USA

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

INJURY PREVENTION, WORKSHOPS ON INJURIES TO HIGH SCHOOL ATHLETES

**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
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PRESIDENT	MICHAEL TRAFICANTE	173 SWEETBRIAR DRIVE CRANSTON, RI 02920 USA
TREASURER	KATHLEEN KELLEY	262 ABBOTT RUN VALLEY RD CUMBERLAND, RI 02864 USA
SECRETARY	BETH PENKALA	51 ALMY AVE WARREN, RI 02885 USA
VICE PRESIDENT	TONY RAINONE	244 DEERFIELD RD CRANSTON, RI 02920 USA
DIRECTOR	ROBERT PALAZZO	166 ENFIELD AVE PROVIDENCE, RI 02908 USA
DIRECTOR	ELAINE BOTELHO	14 STOCKTON DR MIDDLETOWN, RI 02842 USA
DIRECTOR	ROBERT CAVANAGH	5 PENISULA ROAD WAKEFIELD, RI 02879 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**

KATHLEEN KELLEY 262 ABBOTT RUN VALLEY ROAD CUMBERLAND , RI 02864

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

**Signed this 12 Day of February, 2023 at 8:30:46 AM 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 KATHLEEN KELLEY  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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