RI SOS Filing Number: 202576661540 Date: 7/2/2025 4:00:00 PM

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

2025 Annual Report for the year:
Non-Profit Corporation —

			_			
>	Filina	period:	February	1.	- Mav	1

→ Filing Fee: \$20.00

RECEIVED

-> Penalty: Additional \$25.00 fee if	form is not filed by May 31.	<u> </u>	IS SVCS DIV			
1. Entity ID Number 2. Exact name of the Corporation Loggia Roma #27/000 18059 The Sons OF I LALY IN AMERICAL 2 AGE 1609						
3. State of Incorporation	5. Brief description of the charact	er of business conducted in Rhode Isl	and OUR MLSSior			
Phode IslANd	is to recognise	and HELP worth y 1	individuals			
4. NAICS Code	The tkalian Language and its principles,					
813319		rships and dona	•			
6. Principal Office Address	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	City	State Zip			
7 POMMENY	ILLE STREET	PAWTUCKET	RI 01861			
7. List ALL officers (names and addresses)  Check the box to indicate an attachment						
President Name  MUCLE	G, HEroux	Vice-President Name DIanha Arr	uda			
Street Address	VILLE Street	Street Address 22 Patrice				
City Pawtucket	State RT 2861	City	State Zip			
Secretary Name	1 13 + 10 700	SEEKONK Treasurer Name	A . 1			
Barbaro	v Brurgery	Jorrains	Elderkin			
Street Address // ELSEN ha	ower Drive		t Street			
Smithfield	State 2 ± Zip 2917	Pay tucket	State RI 21p 02861			
8. List ALL directors (names and ad	ddresses). RI Corporations MUST					
		Check the				
		<u> </u>	box to indicate an attachment			
Director Name Lisa A.	HEROUX	Director Name	· Allister			
Street Address		Director Name  Nancy  Street Address	= Allister			
Street Address Pommen	VILLE Street	Director Name  Nancy M.  Street Address  23 Tena	CE AVE			
Street Address Pommen City Pautuckst Director Name	State R # 2ip 02861	Director Name  Nancy Mancy  Street Address  23 Tenna  City Proudence  Director Name	Allister CE AVE State Zip PI 02909			
Street Address  City P  City P  Director Name  Marian  Street Address  Street Address	State Rt 210 Lindia	Director Name  Nancy Mancy  Street Address  23 Tenna  City Proudence  Director Name	CE AVE			
Street Address  City Pawtuckst  Director Name  Marian  Street Address  359 Green Wich	State Rt 210 State Rt 02861 Lindia LAUE, APT 109	Director Name  Nancy Mancy Man	Allister  CE AVE  State Zip  07909  andiers  Cicle  State Zip			
Street Address Tommen City Pawtuckst Director Name Marian Street Address 359Grzenwic City Warwick	State Rt Zip 2861  Lindia  LAUE, APT 109  State Rt Zip 2886	Director Name  Nancy Mancy Man	Allister  CE AVE  State Zip  02909  andiers  Cicle  State Zip  Zip  202601			
Street Address  City Pawtuckst  Director Name  Marian  Street Address  359 Green Wick  City  Warwick  9. The Registered Agent information	State Rt Zip 02861  Lindia  LAUE, APT 109  State Rt Zip 2886  n of record with the RI Departmen	Director Name  Nancy Mancy Man	State Zip O2601  State Zip O2909  C/C/S  State Zip O2601  filing Form 641.			
Street Address  City Pawtuckst  Director Name  Marian  Street Address  359 Green Wick  City  Warwick  9. The Registered Agent information	State R T D2861  Lindia  LAUE, APT 109  State R T D2866  To of record with the RI Department of the and affirm that I have examine	Director Name  Nancy Mancy  Street Address  City  Director Name  Dant EL  Street Address  Street Address  Street Address  City  Hyahhs  tof State is accurate. Changes required this report, including any accomp	State Zip O2601  State Zip O2909  C/C/S  State Zip O2601  filing Form 641.			
Street Address  City Pawtuckst  Director Name  Marian  Street Address  3596peen WIC  City  Warwick  9. The Registered Agent information  Under penalty of perjury, I declar  statements, and that all statements	State R T 2ip 02861  Lindia  LAUE APF 109  State R T 2ip 2886  In of record with the RI Department of the contained herein are true and affirm that I have examined the contained the	Director Name  Nancy Mancy  Street Address  City  Director Name  Dant EL  Street Address  Street Address  Street Address  City  Hyahhs  tof State is accurate. Changes required this report, including any accomp	Allister  CE AVE  State Zip  07909  andiers  Cicle  State Zip  O2601  filing Form 641.  conying schedules and			
Street Address  City Pawtuckst  Director Name  Marian  Street Address  3596peen WIC  City  Warwick  9. The Registered Agent information  Under penalty of perjury, I declar  statements, and that all statements	State R T D2861  Lindia  LAUE, APT 109  State R Zip 2866  To of record with the RI Departments contained herein are true and stident. Vice-President, Secretary, Assistant S	Director Name  Nancy Mancy  Street Address  23 Terra  City  Providence  Director Name  Dance  Street Address  Street Address  Street Address  Street Address  Street Address  Gance  City  Hyahhs  t of State is accurate. Changes required this report, including any accompand correct.	Allister  CE AVE  State Zip  02909  and CErs  State Zip  02601  filing Form 641.  Danying schedules and  No. Receiver or Trustee.  Date			
Street Address  City Pawtuckst  Director Name  Marcan  Street Address  359 Green Wic  City  9. The Registered Agent informatio  Under penalty of perjury, I declar  statements, and that all statement  This report must be signed by either the Press  Name of Officer/Authorized Repress  Murcel G.	State P T 02861  Lindia  LAUE, APT 109  State P Zip 2886  In of record with the RI Department onto contained herein are true and affirm that I have examined the contained herein are true	Director Name  Nancy Mancy  Street Address  23 Terra  City  Providence  Director Name  Dance  Street Address  Street Address  Street Address  Street Address  Street Address  Gance  City  Hyahhs  t of State is accurate. Changes required this report, including any accompand correct.	State Zip 02909  AND CENS  State Zip 02909  AND CENS  State Zip 02601  filing Form 641.  Denying schedules and  Ive, Receiver or Trustee.			
Street Address  City Pawtuckst  Director Name  Maria  Street Address  359 Green Wick  9. The Registered Agent information  Under penalty of perjury, I declar  statements, and that all statement  This report must be signed by either the Present	State P T 02861  Lindia  LAUE, APT 109  State P Zip 2886  In of record with the RI Department onto contained herein are true and affirm that I have examined the contained herein are true	Director Name  Namcy Mancy  Street Address  City  Providence  Director Name  Dance  Street Address  Street Add	Allister  CE AVE  State Zip  02909  and CErs  State Zip  02601  filing Form 641.  Danying schedules and  No. Receiver or Trustee.  Date			
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148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

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