RI SOS Filing Number: 202336438290 Date: 5/31/2023 3:20:00 PM



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 - ENTER THE CURRENT FILING YEAR 2023: 2023

- 1. Corporate ID No. 000075511
- 2. Name of Corporation Billy Andrade Brad Faxon Charities for Children, Inc.
- 3. State of Incorporation

State: RI

NAICS CODE

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 <u>click here.</u>

NAICS Code

813219

4. Principal Office Address

No. and Street: <u>144 WESTMINSTER STREET</u>

City or Town: PROVIDENCE State: RI Zip: 02903 Country: USA

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

CONSTITUTED FOR CHARITABLE, EDUCATIONAL AND SCIENTIFIC PURPOSES

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	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country

PRESIDENT	WILLIAM T. ANDRADE	4429 EAST BROOKHAVEN DRIVE ATLANTA, GA 30319 USA
TREASURER	PAULA M. MCNAMARA	91 MAIN STREET, STE. 118 WARREN, RI 02885 USA
SECRETARY	PAULA M. MCNAMARA	91 MAIN STREET, STE. 118 WARREN, RI 02885 USA
VICE PRESIDENT	BRAD J. FAXON JR.	11133 GREEN BAYBERRY DRIVE PALM BEACH GARDENS, FL 33418 USA
DIRECTOR	ELIZABETH Z. CHACE	144 WESTMINSTER STREET PROVIDENCE, RI 02903 USA
DIRECTOR	DAVID H. CHACE	144 WESTMINSTER STREET PROVIDENCE, RI 02903 USA
DIRECTOR	THOMAS F. HUDSON	144 WESTMINSTER STREET PROVIDENCE, RI 02903 USA
DIRECTOR	WILLIAM F. LUNNIE	79 SHERMAN AVENUE SEEKONK, MA 02771 USA
DIRECTOR	BRADFORD S. DIMEO	144 WESTMINSTER STREET PROVIDENCE, RI 02903 USA
DIRECTOR	THOMAS F. GILBANE JR.	144 WESTMINSTER STREET PROVIDENCE, RI 02903 USA
DIRECTOR	MATTHEW T. MARCELLO III	100 WESTMINSTER STREET, SUITE 1500 PROVIDENCE, RI 02903 USA
DIRECTOR	J. TERRENCE MURPHY	144 WESTMINSTER STREET PROVIDENCE, RI 02903 USA
DIRECTOR	DORY RICCI FAXON	11133 GREEN BAYBERRY DRIVE PALM BEACH GARDENS, FL 33418 USA
DIRECTOR	THOMAS M. RYAN	144 WESTMINSTER STREET PROVIDENCE, RI 02903 USA
DIRECTOR	PAUL J. SALEM	144 WESTMINSTER STREET PROVIDENCE, RI 02903 USA
DIRECTOR	JODY L ANDRADE	4429 EAST BROOKHAVEN DRIVE ATLANTA, GA 30319 USA
DIRECTOR	JOHN P. ANDRADE	559 HOPE STREET BRISTOL, RI 02809 USA
DIRECTOR	ANDREW J. BERG	3550 LENOX ROAD NE, SUITE 2700 ATLANTA, GA 30326 USA
DIRECTOR	BRADFORD R. BOSS	179 WESTCOTE DRIVE S. KINGSTOWN, RI 02879 USA
DIRECTOR	RUSSELL A. BOSS	144 WESTMINSTER STREET PROVIDENCE, RI 02903 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

 $\frac{\text{MATTHEW T. MARCELLO, III}}{\text{\& SNYDER LLP PROVIDENCE}}, \frac{\text{100 WESTMINSTER STREET, SUITE 1500}}{\text{MATTHEW T. MARCELLO, III}} \frac{\text{100 WESTMINSTER STREET, SUITE 1500}}{\text{C/O HINCKLEY, ALLEN MATCHEN MAT$

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

Signed this 31 Day of May, 2023 at 3:21:24 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 /PAULA M. MCNAMARA/

Signature of Authorized Person

Form No. 631 Revised 09/07

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