



State of Rhode Island  
and Providence Plantations  
Office of the Secretary of State

A. Ralph Mollis, Secretary of State  
Corporations Division  
148 W. River Street  
Providence, RI 02904-2615  
101.222.3040

**NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2007**

Filing Period: June 1 - June 30 • Filing Fee: \$20.00 \* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK  
\* 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.

1. Corporate ID No. 000028618		2. Name of Corporation Charlestown Ambulance & Rescue Service, Inc.			
3. State of Incorporation R.I.		4. Corporate address in Rhode Island - Street Address 4891 Old Post Road, P.O. Box 346		City Charlestown	Zip 02813
5. Foreign corporation. Enter principal office address			City	State	Zip
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island Emergency Medical Transportation for the Sick &/or Injured					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Christopher P. Sloan			Vice President Name William S. Campbell		
Street Address P.O. Box 346			Street Address P.O. Box 346		
City Charlestown	State RI	Zip 02813	City Charlestown	State RI	Zip 02813
Secretary Name Ruth Chappell			Treasurer Name Jeanna Krukowski		
Street Address P.O. Box 346			Street Address P.O. Box 346		
City Charlestown	State RI	Zip 02813	City Charlestown	State RI	Zip 02813
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23					
Director Name Lisa Schipritt			Director Name Franklin Raposa		
Street Address P.O. Box 346			Street Address P.O. Box 346		
City Charlestown	State RI	Zip 02813	City Charlestown	State RI	Zip 02813
Director Name Patrick J. McMahon			Director Name		
Street Address P.O. Box 346			Street Address		
City Charlestown	State RI	Zip 02813	City	State	Zip
9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-23					
Agent Name Jeanna Krukowski			Address 4891 Old Post Road		
Address P.O. Box 346			City Charlestown	Zip 02813	

This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



**FILED**

JAN 16 2008

By W.S.C.  
1:50  
1147016

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.

Signature of Officer

William S. Campbell

Print or Type Name of Officer

Vice President

Title of Officer

1/16/08  
Date

File Date	
Check No.	
By:	
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