



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
401.222.3040

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. 000027519		2. Name of Corporation Fraternal Order of Police, Newport Lodge #8	
3. State of Incorporation RI		4. Corporate address in Rhode Island - Street Address P.O. Box 3959	
		City Newport	Zip 02840
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 Bargaining Agent and Fraternal Organization for Members of the Newport Police			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Christopher Hayes		Vice President Name Michael Caruolo	
Street Address 27 Moy Ct.		Street Address 120 Broadway	
City Middletown	State RI	City Newport	State RI
Zip 02842		Zip 02840	
Secretary Name Peter Calo		Treasurer Name Adam Conheeny	
Street Address 120 Broadway		Street Address 120 Broadway	
City Newport	State RI	City Newport	State RI
Zip 02840		Zip 02840	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ 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 Robert Silveria		Director Name Joe Carroll	
Street Address 120 Broadway		Street Address 120 Broadway	
City Newport	State RI	City Newport	State RI
Zip 02840		Zip 02840	
Director Name Anson Smith		Director Name	
Street Address 120 Broadway		Street Address	
City Newport	State RI	City	State Zip
Zip 02840			
9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78			
Agent Name Christopher Hayes		Address 27 Moy ct.	
Address		City Middletown	Zip 02842

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



0 0 0 0 2 7 5 1 9

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

Date

Christopher Hayes

Print or Type Name of Officer

President

Title of Officer

File Date	FILED
Check No.	JAN 16 2008
By:	By 1862
FOR SECRETARY OF STATE USE ONLY	