

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 2008

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. 126172	2. Name of Corp The RI St	2. Name of Corporation The RI State Association of Fire Fighters Line of Duty Death Benefit Fund					
3. State of Incorporation Rhode Island	4. Corporate ada	4. Corporate address in Rhode Island - Street Address 356 Smith Street			2ip 02908		
5. Foreign corporation. Enter principal office address			City	State	Zip		
6. Brief Description of the charac							
To honor and perpetua	ate the memory	of deceased and inju	red fire fighters and rescue	personnel who are k	illed in the line of duty		
			(ACHMENT) TILL IN SPACE				
Frank J. Montanaro			Paul L. Valletta, Jr.				
Street Address 39 Weaver Street			Street Address 63 Chambly Avenue				
City Cranston	State RI	^{Zip} 029 20	City Warwick	State RI	Zip 02888		
Secretary Name Robert M. Lavin			Treasurer Name Robert M. Lavin				
Street Address 38 Centennial Avenue			Street Address 38 Centennial Avenue				
Barrington	State RI	^{Zip} 02806	City Barrington	State RI	<i>Zip</i> 02806		
8. NAMES AND ADDRESS	ES OF THE DIRI	CTORS: ("X" BOX FOR A	TTACHMENT) TILL IN SPACE	S BEFORE USING ATTA	I ACHMENTS		
THE NUMBER OF DIREC	TORS OF A DOL	IESTIC (RHODE ISLANI	D) CORPORATION SHALL NO	T BE LESS THAN THR	EE (3). R.I.G.L. 7-6-23		
Director Name James Grande			Director Name Robert Neill, Jr.				
Street Address 12 Joyce Drive			Street Address 352 Plain Road				
North Providence	State RI	^{Zip} 02911	West Greenwich	State RI	^{Zip} 02817		
Director Name Paul L. Valletta, Jr.			Director Name				
Street Address 63 Chambly Avenue			Street Address				
City Warwick	State RI	<i>Zip</i> 02888	City	State	Zip		
9. REGISTERED AGENT IN	RHODE ISLANI	D - DO NOT ALTER - Ch	anges require filing of Form	641 - R.I.G.L. 7-6-13	7-6-78		
Agent Name Robert M. Lavin			Address				
Address 356 Smith Street			Providence				
This report mus	at be signed by eit	her the President Vice P	resident Secretary Assistant Sc	Loratow, Transcer. D			

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File Date			:
Check No.	JUN_3 0 2008		
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1	FOR SECRETARY OF STATE USE O	NLY	• •

Under penalty of perjury, I declare	and affirm tha	t I have examined this
report, including any accompanying	schedules and	statements, and that all
statements contained herein are true	and correct.	
	a marine	

Signature of Officer

Robert M. Lavin Print or Type Name of Officer

Secretary/Treasurer

Title of Officer