



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

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. 66730		2. Name of Corporation JAMESTOWN MEMORIAL - VETERANS OF FOREIGN WARS - POST 9447	
3. State of Incorporation Rhode Island		4. Corporate address in Rhode Island - Street Address 6 West St	
5. Foreign corporation. Enter principal office address not applicable		City JAMESTOWN	Zip RI 02835
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name COMMANDER G.M. BRUCE LIVINGSTON		Vice President Name SR. VICE COMMANDER Donald RICHARDSON	
Street Address 100 Racquet Road		Street Address 12 DAVIS ST	
City Jamestown	State RI	City JAMESTOWN	Zip 02835
Secretary Name Adjutant FRANCIS CLARK		Treasurer Name QUARTERMASTER VICTOR C. RICHARDSON	
Street Address 120 Racquet Rd		Street Address 165 HAMILTON AVE	
City JAMESTOWN	State R.I	City JAMESTOWN	Zip 02835
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 SR VICE COMMANDER AMY A VIGARS		Director Name CHESTER J. Greene	
Street Address 15. STARBOARD ST		Street Address 104 HOWLAND AVE	
City Jamestown	State RI	City JAMESTOWN	Zip 02835
Director Name JOHN McGRATH		Director Name	
Street Address 43 NORTH Rd		Street Address	
City Jamestown	State RI	City	Zip
9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78			
Agent Name AMY A. VIGARS		Address	
Address 6 West St		City JAMESTOWN RI	Zip 02835

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

File Date **FILED**
Check No. **JUL 16 2008**
By: **1236**
FOR SECRETARY OF STATE USE ONLY

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.

Victor C. Richardson 2008 July 14
Signature of Officer Date
Victor C. Richardson
Print or Type Name of Officer
Quatermaster (Treasurer)
Title of Officer