



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. 000119874		2. Name of Corporation Providence Memorial Post #45 of the VFW USA	
3. State of Incorporation RI		4. Corporate address in Rhode Island - Street Address 118 Glenbridge Street	
5. Foreign corporation. Enter principal office address 290 Killingly St		City Prov.	Zip 02909
6. Brief description of the character of the affairs which are actually conducted in Rhode Island Veterans of Foreign War of USA		State RI	Zip 02909
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Rosanna J Evans		Vice President Name Robert J. Simoneau	
Street Address 290 Killingly Street		Street Address 21 Alden Street	
City Prov.	State RI	City Providence	State RI
Zip 02909		Zip 02919	
Secretary Name Amanda Oteazu		Treasurer Name Dale Simkins	
Street Address 115 Goldsmith Ave		Street Address 64 Laurel Hill Ave	
City E. Prov.	State RI	City Prov.	State RI
Zip 02914		Zip 02909	
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 Basil Madyun		Director Name Robert S. Simoneau	
Street Address 34 Belmont Ave		Street Address 10 Fenway Street	
City Prov.	State RI	City N. Prov.	State RI
Zip 02908		Zip 02911	
Director Name Missa Simoneau		Director Name	
Street Address 10 Fenway Street		Street Address	
City N. Prov.	State RI	City	State
Zip 02911			
9. REGISTERED AGENT IN RHODE ISLAND			
This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-98			

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

FILED

MAY 27 2009

By [Signature]  
29-90429

File Date _____
Check No. _____
By: _____
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.

Rosanna J. Evans 27 May 09  
Signature of Officer Date  
Rosanna J. Evans  
Print or Type Name of Officer  
President  
Title of Officer