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 2009

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.	2. Name of Corporation		
26555	EAST PROVIDENCE FIREFIGHTERS BENIFICAL ASSOCIATION		
3. State of Incorporation	4. Corporate address in Rhode Island - Street Address	City	Zip
RHODE ISLAND	329 BULLOCKS POINT AVENUE	RIVERSIDE	02915
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

HEALTH COVERAGE FOR RETIRED FIREFIGHTERS OVER 65

7. NAMES AND ADDRESSES OF THE OFFICERS: ***("X" BOX FOR ATTACHMENT)*** ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name			Vice President Name		
ROBERT JOBIN			STEPHEN CAMILLE		
Street Address			Street Address		
506 CRANDELL RD			99 WAMPANOAG TRAIL		
City	State	Zip	City	State	Zip
TIVERTON	RI	02878	EAST PROVIDENCE	RI	02915
Secretary Name			Treasurer Name		
MICHAEL D. CURRAN			GEORGE WYROSTEK		
Street Address			Street Address		
295 HILLSDALE RD			30 TEE JAY DR		
City	State	Zip	City	State	Zip
RICHMOND	RI	02892	SEEKONK	MA	02771

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			Director Name		
ALFORD NORTH			JOSEPH DZIEDZIC		
Street Address			Street Address		
58 LAURA CIR			10 BULLOCKS AVENUE		
City	State	Zip	City	State	Zip
CRANSTON	RI	02920	BARRINGTON	RI	02806
Director Name			Director Name		
JOSEHP DASILVA			JOSEPH DONATO		
Street Address			Street Address		
32 ANDREWS CT			2 CEDARWOOD DR		
City	State	Zip	City	State	Zip
BRISTOL	RI	02809	RIVERSIDE	RI	02915

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. 7-6-13/7-6-78

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

FILED
AUG 17 2009
By

[redacted] 26555

[redacted]

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.

X [signature] 8-17-09
Signature of Officer *Date*

X Michael D. Curran
Print or Type Name of Officer

X Secretary
Title of Officer

[redacted]

File Date _____
Check No. _____
By: _____
FOR SECRETARY OF STATE USE ONLY

Form 631 Rev. 09/17