



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
(401.222.3030)

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2010

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 512631		2. Name of Corporation POISSON, COURNOYER, CARPENTIER, BACON CARTER 12 DAY	
3. State of Incorporation RHODE ISLAND		4. Corporate address in Rhode Island - Street Address 20 EAST ST	
5. Foreign corporation. Enter principal office address N/A		City N/A	Zip N/A
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island BUILD BETTER LIVES FOR AMERICANS DISABLED VETERAN'S THIER SPOUSES AND CHILDREN THROUGH VETERAN PROGRAM AND ADVOCACY		7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS	
President Name RICHARD W. SCHATZ		Vice President Name JOHN DEGNAN	
Street Address 20 EAST ST		Street Address 216 GREEN ST	
City CUMBERLAND	State RHODE ISLAND	Zip 02864	City N. SMITHFIELD
Secretary Name THOMAS PAINE		Treasurer Name ERNEST L. BARRETTE	
Street Address 2557 DIAMOND HILL RD.		Street Address 449 CADWELL AVE	
City WOODSOCKET	State RHODE ISLAND	Zip 02895	City WOODSOCKET
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS		9. REGISTERED AGENT IN RHODE ISLAND	
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23		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	
Director Name RICHARD W. SCHATZ		Director Name JOHN DEGNAN	
Street Address 20 EAST ST.		Street Address 216 GREEN ST	
City CUMBERLAND	State RHODE ISLAND	Zip 02864	City N. SMITHFIELD
Director Name THOMAS PAINE		Director Name ERNEST L. BARRETTE	
Street Address 2557 DIAMOND HILL RD.		Street Address 449 CADWELL AVE.	
City WOODSOCKET	State RHODE ISLAND	Zip 02895	City WOODSOCKET

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

FILED

File Date MAY 14 2010
Check No. BY 1032
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.

Richard W. Schatz May 12, 2010
Signature of Officer Date
RICHARD W. SCHATZ
Print or Type Name of Officer
PRESIDENT / COMMANDER
Title of Officer