

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 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

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1. Corporate ID No.	2. Name of Corporation						
74809	OPERATION STAN	OPERATION STAND DOWN RHODE ISLAND					
3. State of Incorporation	4. Corporate address in Ri	bode Island - Street A	ddress	City	Zip		
RHODE ISLAND	1010 HARTFORD	AVENUE		JOHNSTON	02919		
5. Foreign corporation. Enter principal office address			City	State	Zip		
N/A			N/A	N/A	N/A		
5. Brief Description of the chara	icter of the affairs which are acti	ually conducted in Rh	ode Island				
PROVIDE HOUSING A	ND SERVICES TO HOM	ELESS AND DIS	SABLED VETERANS OF U.S.	MILITARY			
7. NAMES AND ADDRES	SSES OF THE OFFICERS:	("X" BOX FOR AT	TACHMENT)	ES BEFORE USING ATTACH	IMENTS		
President Name			Vice President Name				
ANTHONY DEQUATTRO			ROBERT FORAND	ROBERT FORAND			
Street Address			Street Address 5 PINE HILL ROAD				
20 BALLOU STREET							
City	State	Zip	City	State	Zip		
CUMBERLAND	RHODE ISLAND	02864	NORTH SITUATE	RHODE ISLAND	02857		
Secretary Name			Treasurer Name				
JENNIFER R. SALISBURY			ROBERT FORAND				
Street Address			Street Address				
639 BOSTON NECK ROAD, APARTMENT#2			5 PINE HILL ROAD				
Сйу	State	Ζip	City	State	ZΨ		
NORTH KINGSTON	RHODE ISLAND		NORTH SITUATE	RHODE ISLAND	02857		
			ATTACHMENT) TILL IN SPAC				
	ECTORS OF A DOMESTIC	C (RHODE ISLA)	ND) CORPORATION <u>SHALL N</u>	<u>OT BE LESS THAN THREE</u>	E (3). R.I.G.L. 7-6-		
Director Name			Director Name				
JOHN A. JOHNSON			FREDERICK t. CORREY				
Street Address			Street Address				
56 ALVIN STREET			225 NEW LONDON	<u>AVENUE, APARTMENT</u>			
City	State	Zip	City	State	Zip		
PROVIDENCE	RHODE ISLAND	02907	CRANSTON	RHODE ISLAND	02920		
Director Name	TTE		Director Name				
MICHAEL G. BOUTIETTE			0411				
Street Address			Street Address				
137 NEWELL AVENU		1 224	Z210	State	Zip		
City	State	<i>Ζί</i> ρ 02060	City	State	**************************************		
PAWTUCKET 9. registered agent	RHODE ISLAND	∪∠860	•	I	1		
7. REGISTEKED AGENT	IN KHODE ISLAND						
This information is curren	ntly of record in the Office	of the Secretary of	of State. Changes require filing of	Form 641 - R.I.G.L. 7-6-13/	7-6-78		
This report a	must be signed by either t	he President Vice	e President Secretary Assistant	Secretary, Treasurer, Recei	ver or Trustee		

Title of Officer

- 74809

File Date	FILED
Check No.	MAY 24 2010
By: By	v-1446
	OR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I	I declare and affirm that I i	iave exami	ined thi	S
reporta including any accon	npanying schedules and state	ements, and	d that al	ı
statements contained hereir	are true appropriecy		1)
Strttan,	Il Valto	5	20	[10
Signature of Officer		Da	te	-
ANTHONY DEQ	UATTRO			_
Print or Type Name of Office	?r			
PRESIDENT				

Form 631 Rev. 09/17