

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 401.2 Filing Period: 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 10 No. 9 6 5 9	2. Name of Corporation	Rovideroc	e Police As	SOCIATION	·
3. State of Incorporation 4. Corporate address in Rhode ISIAND 325 WeSTMI				PROVidence	02903
5. Foreign corporation. Enter print	cipal office address		City	State	Zip
6. Brief Description of the character of AID AND KOLIÉF. ORPHAN SOF	of the affair; which are act TO The SICK Deceased /	ually conducted in Rhode Isla 'AND DIBABLE! NEMBER <	Members, AND A	Be, To Thewis	Dows AND
7. NAMES AND ADDRESSES	OF THE OFFICERS	. ("X" BOX FOR ATTACH	MENT)   FILL IN SPACES B	EFORE USING ATTACE	IMENTS
JOHN E. EGAN SR.			JOHN (! /howehearty		
	Alsam Ro	<i>l.</i>	Street Address 26 LONG-WOOD Ave.		
So. Kink-510n	R. V.	07879	PROVIDENCE	State R. O	02908
Secretary Name MARTIN F. Homes			FRANCI'S M. SMITH		
Street Address 126 AlBert ave.			Street Address 15 Candlewood DR.		
ChansTow 8. NAMES AND ADDRESSES	State. O S OF THE DIRECTOR	25p 02905 RS: ("X" BOX FOR ATTAC	CHIV GROUNDITE	State	ODS OF
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23					
RAYMOND J. KING			NORMAN ARSENSULT		
Street Address 71 Lernon Ave-			Street Address 37 ARMINGTON Ave		
PROVIDENCE	State J.	0 J908	PROVIDENCE	State R. U.	02908
Director Pame RAY MON ]	) Herou	X	Director Name		
Street Address 77 Phanix Ave.			Street Address		3
CRANSTON	State R. O	Zip	City	State	Zip
9. REGISTERED AGENT IN	THODE ISLAND	GLNEGAN,.	325 WAShing	stow ST., PRO	U, RNO 02903
This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-7					
This report must	be signed by either t	he President, Vice Pres	ident, Secretary, Assistant Sec	cretary, Treasurer, Recei	ver of Trustee
					6
	ED	<b>-</b>	report, including any ac	ry, I declare and affirm the companying schedules and	
statements contained herein are thursand correct.					
JUN 01 ZUIU  Signature of Officer  Date					
Check No. JUARTIN F. Alames					
Ву: ВУ			Print or Type Name of O	RV	
FOR SECRETARY OF ST	TATE USE ONLY		Title of Officer		Form 631 Rev. 09/17