

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

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 Cir.	rporation	-			
26494	.East Greenwich Veteran Firemen's Home Corporation					
3. State of Incorporation	4. Corporate a	ddress in Rhode Island - Street	Address	City	Zip	
Rhode Island	80 Queen	Street		East Greenwich	02818	
5. Foreign corporation, End	Enter principal office address		City	State	Zip	
		ich are actually conducted in R				
PRIVATE SOCIAL OR	GANIZATION FO	R THE BENEFIT OF IT	S MEMBERS AND CHARITABI	LE ORGANIZATIONS		
7. NAMES AND ADDRI	ESSES OF THE OF	FICERS ("X" BOY FOR A	TTACHMENT) TILL IN SPACE	EC DEEADE HOING AMELON	has majorio	
President Name		TIODAGI (A BOATOR A	Vice President Name	ES DEFORE USING ATTACE	imen18	
David Purvis						
Street Address			Richard Silva Street Address			
165 River Farm Drive	}		647 Frenchtown Rd			
City	State	Zip	City	State	Zip	
East Greenwich	RI	02818	East Greenwich	RI	02818	
Secretary Name			Treasurer Name		1	
Paul Wilcox			James Goggin			
Street Address			Street Address			
7 Dimasi Ct			1 Forest Lane			
City	State	Zip	CHy	State	Zip	
Vest Warwick	RI	02892	East Greenwich	RI	02818	
S. NAMES AND ADDRI	SSES OF THE DI	RECTORS: ("X" BOX FOR	ATTACHMENT) FILL IN SPAC	ES BEFORE USING ATTACI	HMENTS	
THE NUMBER OF DIR	ECTORS OF A DO	MESTIC (RHODE ISLA	ND) CORPORATION SHALL N	<u>OT BE LESS THAN THREE</u>	(3). R.I.G.L.	
Director Name			Director Name			
Joseph R. Sousa			David Preble			
					-	
			Street Address			
24 Canonicus Trail	Lo		Street Address 303 Beechwood Driv	e		
24 Canonicus Trail	State	Zip	Street Address 303 Beechwood Driv	State	Zip	
24 Canonicus Trail Gir East Greenwich	State RI	Zip 02818	Street Address 303 Beechwood Driv City East Greenwich		Ζір 02818	
24 Canonicus Trail City East Greenwich Director Name	1		Street Address 303 Beechwood Drivetty East Greenwich Director Name	State	1 *	
24 Canonicus Trail City East Greenwich Director Name Wayne Johnson	1		Street Address 303 Beechwood Driv City East Greenwich Director Name Kenneth Ross	State	1 *	
24 Canonicus Trail City East Greenwich Director Name Wayne Johnson Itreet Address	1		Street Address 303 Beechwood Driv City East Greenwich Director Name Kenneth Ross Street Address	State RI	1 *	
24 Canonicus Trail City East Greenwich Director Name Wayne Johnson Street Address 74 Division Street	RI	02818	Street Address 303 Beechwood Drive City East Greenwich Director Name Kenneth Ross Street Address 28 Meadowbrook Rd	State RI	1 *	
24 Canonicus Trail City East Greenwich Director Name Wayne Johnson Greet Address 74 Division Street	RI	02818	Street Address 303 Beechwood Drivers City East Greenwich Director Name Kenneth Ross Street Address 28 Meadowbrook Rd City	State RI State	02818	
Street Address 24 Canonicus Trail City East Greenwich Director Name Wayne Johnson Street Address 74 Division Street City East Greenwich D. REGISTERED AGENT	State RI	02818 Zip 02818	Street Address 303 Beechwood Drive City East Greenwich Director Name Kenneth Ross Street Address 28 Meadowbrook Rd	State RI	02818	
24 Canonicus Trail City East Greenwich Director Name Wayne Johnson Street Address 74 Division Street City East Greenwich D. REGISTERED AGENT	State RI T IN RHODE ISLA	02818 24p 02818 ND	Street Address 303 Beechwood Driv City East Greenwich Director Name Kenneth Ross Street Address 28 Meadowbrook Rd City East Greenwich	State RI State RI	02818 210 02818	
24 Canonicus Trail City East Greenwich Director Name Nayne Johnson Direct Address 74 Division Street City East Greenwich D. REGISTERED AGENT	State RI T IN RHODE ISLA	02818 24p 02818 ND	Street Address 303 Beechwood Drivers City East Greenwich Director Name Kenneth Ross Street Address 28 Meadowbrook Rd City	State RI State RI	02818 210 02818	

File Date	FILED	
Check No.	JUN 1 4 2010	_
Ву:В	y 2106	
	FOR SECRETARY OF STATE USE ONLY	_

26494

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.

Signature of Officer

James Goggin

Print or Type Name of Officer

Treasurer

page:

Title of Officer

Form 631 Rev. 09/17



A. Ralph Mollis, Secretary of State

Corporations Division
148 W. River Street

Providence, RI 02904-2615

401.222.3040

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1. Corporate ID No. 2 (2494	2. Name of Cor	2. Name of Corporation				
3. State of Incorporation	4. Corporate ac	4. Corporate address in Rhode Island - Street Address City Zip			Zip	
5. Foreign corporation. Ent	er principal office addr	ess	City	State	Zip	
					, np	
6. Brief Description of the cha	racter of the affairs whi	ich are actually conducted in k	tbode Island	·		
7. NAMES AND ADDRI	ESSES OF THE OF	FICERS: ("Y" BOY EOD A	TTACUMENT) - FILL IN CDAC	e Decode Heimo	A TOTA CHAMERITO	
7. NAMES AND ADDRESSES OF THE OFFICERS; ("X" BOX FOR A President Name			Vice President Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Secretary Name			Treasurer Name			
Street Address		<u>-</u>	Street Address			
City	State	Zip	City	State	Zip	
8. NAMES AND ADDRI	 ESSES OF THE DI	 RECTORS: ("X" BOX FOR	ATTACHMENT) FILL IN SPAC	 PS REFORE USING	ATTACUMENTE	
THE NUMBER OF DIR	ECTORS OF A DO	MESTIC (RHODE ISLA	IND) CORPORATION SHALL N	OT BE LESS THAN	THREE (3), R.I.G.L. 7-6-2	
Director Name			Director Name		(5)	
Richard Enander			Lawrence Campion			
Street Address			Street Address			
23 Clemente Drive			37 Keely Ave			
City	State	Zip	City	State	Zip	
East Greenwich	RI	02818	Warwick	Ri	02886	
Director Name			Director Name			
James Trainor			Michael Sicco			
Street Address			Street Address			
66 Littlefield Rd	State	77.6	21 Whispering Pines			
East Greenwich	RI	Ζίρ 02818	West Greenwich	State RI	Ζψ 02817	
9. REGISTERED AGENT		ND	Wood Oreenwar	Lixi	102017	
			of State. Changes require filing of	Form 641 - R.I.G.L.	7-6-13/7-6-78	
tins report	must be signed by	either the President, vic	e President, Secretary, Assistant	Secretary, Treasure	r, Receiver or Trustee	

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File Date	FILE	ED .		
Check No.	J UN 14	2010		
Ву: Ву	FOR SECRETA	RY 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.

Signature of Officer

Date

Title of Officer

Form 631 Rev. 09/17

page 3.