

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 subjection.

1. Corporate ID No.	2. Name of Corporation						
151623	Builders He	Builders Helping Heroes, Inc.					
3. State of Incorporation		dress in Rhode Island - Street Add	City	Zip			
Rhode Island	450 Vetera	ns Memorial Parkway#	[‡] 301	East Providence	02914		
5. Foreign corporation. Enter principal office address			City	State	Zip		
6. Brief Description of the ch	aracter of the affairs whi	h are actually conducted in Rhod	a Island		<u> </u>		
Trade association for			e isiana				
7. NAMES AND ADDR	ESSES OF THE OF	FICERS: ("X" BOX FOR ATTA	I <i>CHMENT)</i>	CES BEFORE USING ATTACH	IMENTS		
President Name	resident Name			Vice President Name			
Robert Baldwin			Michael Artesani				
Street Address			Street Address				
PO Box 374	- 1		1704 Broad Street				
City	State	Zip	City	State	Zip		
Lincoln	RI	02865-0374	Cranston	RI	02889-1525		
Secretary Name			Treusurer Name				
Roger R. Warren	-	, , , , , , , , , , , , , , , , , , ,	Roger R. Warren				
Street Address 450 Veterans Memorial Parkway #301			Street Address Same				
City	State	Zip	City	State	Zip		
East Providence	∣Rł	02914-5300					
3. NAMES AND ADDR	ESSES OF THE DIR	ECTORS: ("X" BOX FOR AT	TACHMENT) TILL IN SPA	ACES BEFORE USING ATTACE	IMENTS		
THE NUMBER OF DIE	RECTORS OF A DO.	MESTIC (RHODE ISLAND) CORPORATION SHALL	NOT BE LESS THAN THREE	(3). R.I.G.L. 7-6-		
Director Name			Director Name				
Michael L. DeCesare			Paul A. Norbury				
Street Address			Street Address				
75 Ophelia Street			1194 E. Main Road				
City	State	Zip	City	State	Zip		
Providence	RI	02909-5828	Portsmouth	RI	02871-2333		
Director Name Colin P. Kane			Director Name				
Street Address 293 Bourne Avenue			Street Address				
City	State	Zip	200				
Rumford	RI	02916-3345	City	State	Zip		
). REGISTERED AGEN			1		I		
This information is curre	ently of record in the	Office of the Secretary of S	tate. Changes require filing of	of Form 641 - R.I.G.L. 7-6-13/7-	6-78		
		either the President, Vice P					

FILED	
File Date 1 JUN 2 3 2010	-
Check No. By 33	-
FOR SECRETARY OF STATE USE ONLY	

Under penalty of perjury, I declare and affirm report, including any accompanying schedules a statements comained herein are true and correct	and stateme	e examined this ents, and that all
	6/15	12010
Signature of Office DATUE		Date
Print or Type Name of Officer		
Title of Officer		