

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

penalty fee of \$25.00.	_				, ,		
1. Corporate ID No.	2. Name of Corporation						
83855	Cranston V	Cranston Volunteer Firefighters Museum of Meshanticut Park / Oaklawn inc.					
3. State of Incorporation		4. Corporate address in Rhode Island - Street Address			Zip		
Rhode Island	470 Hope I	Road		Cranston	02921		
5. Foreign corporation. Enter principal office address			City	State	Zip		
			1				
6. Brief Description of the charac	ter of the affairs whic	b are actually conducted in F	Rhode Island			_	
Museum of Firefighting &	k Firefighters Eq	uipmint					
			_				
	SES OF THE OF	FICERS: ("X" BOX FOR A	TTACHMENT) TILL IN SP.	ACES BEFORE USING ATT	ACHMENTS		
President Name			Vice President Name				
Kevin LaMorge			James Searles				
Street Address			Street Address				
31 Crossway Road	State	Zip	196 Haswell St	I Co			
Cranston	RI	02910	l ´	State	Zip		
Secretary Name	1121	102910	Warwick	RI	02889		
Paul Sherman			Treasurer Name James Walsh				
Street Address							
102 Deerfield Rd			Street Address 251 Hope Rd				
City	State	Zip	City	State	Zip		
Cranston	RI	02920	Cranston	RI	02921		
			ATTACHMENT) FILL IN SP	IN PACES REPORT HISTOGRAM	UZ9Z1 TACHMENTS		
						22	
Director Name			ND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23 Director Name				
Peter Melim							
Street Address			Albert Suter Street Address				
51 Massachusetts Ave							
City	State	Zip	1985 Cranston St	State	722		
Warwick	RI	02888	Cranston	RI	2φ 02920		
Director Name	11/1	102000	Director Name		102920		
Vincent Vinci			John Caluori, Jr				
Street Address			Street Address				
99 Hines Farm Rd			48 Zoar Ave				
City	State	Zíp	City	State	Zip		
Cranston	RI	02921	Johnston	RI	02919		
9. REGISTERED AGENT	1	•		1	104010		
774:- :- C		O.65 C.3 C	0.0x				
inis information is current	y 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		
This report m	ust be signed by	either the President, Vic	e President, Secretary, Assist	ant Secretary, Treasurer, R	eceiver or Trustee		

	83855 FILED
File Date Check No.	MAY 16 2011' BY 3094 \$2315
Ву:	FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm the report, including any accompanying schedules and	
statements contained herein are true and correct.	
Four D Dan	3-16-2011
Signature of Officer	Date
PAUL D SHERMI	en
Print or Type Name of Officer	
SECRETALY	
Title of Officer	

Form 631 Rev. 09/17