



**State of Rhode Island and Providence Plantations
Office of the Secretary of State**

Fee: \$20.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Non-Profit Corporation
Annual Report**

Filing Period: June 1 - June 30

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.

ANNUAL REPORT YEAR: 2011

1. Corporate ID No. 000551451

2. Name of Corporation Hopkins Hill Firefighters IAFF Local 4824

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: #9 GILLES ST.

City or Town: COVENTRY

State: RI

Zip: 02816 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

WE ARE UNIONIZED EMPLOYEES WITH THE HOPKINS HILL FIRE DISTRICT AND WERE TOLD BY COVENTRY CREDIT UNION WE NEED TO BE INCOPERATED TO OPEN A BANK ACCOUNT.

7. Names and Addresses of the Officers and Directors:

*All officers and directors must be listed. If officers and/or directors have been elected, the title **Incorporator** is no longer applicable; please delete*

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	MICHAEL J. RAPOSE	9 GILLES ST. COVENTRY, RI 02816 USA
INCORPORATOR	MICHAEL J. RAPOSE	9 GILLES ST. COVENTRY, RI 02816 USA
DIRECTOR	SEAN CRUTE	18 NICHOLE LN. COVENTRY, RI 02816 USA
DIRECTOR	MICHAEL J. RAPOSE	9 GILLES ST. COVENTRY, RI 02816 USA
DIRECTOR	PAMELA READ	15 TRAFFORD PARK DR. COVENTRY, RI 02816 USA

8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

MICHAEL RAPOSE 9 GILLES ST. COVENTRY , RI 02816

9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver, or Trustee.

Signed this 8 Day of June, 2011 at 12:06:51 PM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By MICHAEL J. RAPOSE

Signature of Officer of the Corporation

☒ President or ☐ Vice President or ☐ Secretary or ☐ Assistant Secretary or

☐ Treasurer or ☐ Receiver or ☐ Trustee (check one)

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in Section 7.

Form No. 631
Revised 09/07

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