



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

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 2011

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. 109-415		2. Name of Corporation WARWICK MEMORIAL POST 972 VFW OF THE U.S.			
3. State of Incorporation RI		4. Corporate address in Rhode Island - Street Address 840 WEST SHORE RD		City WARWICK	Zip 02889
5. Foreign corporation. Enter principal office address 840 WEST SHORE RD		City WARWICK	State RI	Zip 02889	
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island WE MAKE DONATIONS TO HOSPITALS + VETS HOME + IRAQ VETS + FAMILIES					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name ROBERT HENDRICKSON			Vice President Name HORACE JONES		
Street Address 137 PEABODY DR.			Street Address 21 LOGAN ST.		
City WARWICK	State RI	Zip 02889	City WARWICK	State RI	Zip 02889
Secretary Name RONALD B MINNEAR			Treasurer Name RONALD B MINNEAR		
Street Address 35 GREEN RIVER AVE			Street Address 35 GREEN RIVER AVE		
City WARWICK	State RI	Zip 02889	City WARWICK	State RI	Zip 02889
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23					
Director Name DONALD GAVIN			Director Name MICHAEL J. BREARD		
Street Address 3010 WEST SHORE RD APT 4-3			Street Address 45 SHIP ST		
City WARWICK	State RI	Zip 02886	City WARWICK	State RI	Zip 02889
Director Name STEWART BROWN			Director Name NONE		
Street Address PO BOX 2050			Street Address NONE		
City PROVIDENCE	State RI	Zip 02905	City 	State 	Zip
9. REGISTERED AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-78					

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

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: Ronald B Minnear Date: 6/21/11
Print or Type Name of Officer: RONALD B MINNEAR
Title of Officer: QUARTERMASTER

FILED	
File Date	JUN 23 2011
Check No.	4334
By	BY
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