

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				
± 489808	Vietnam Veterans of America, Inc				
3. State of Incorporation		n Rhode Island - Street Add	ress	City	Zip
New York	8719 Colesville	Rd, Suite 100		Silver Spring	20910
5. Foreign corporation. Enter prin	oreign corporation. Enter principal office address			State	Zip
10 Weybosset St			Providence	RI	02903
6. Brief Description of the character	of the affairs which are	actually conducted in Rhode	e Island		
Veterans service organizati	on assisting with o	laims processing, edu	ication, counseling and any ve	eteran related need.	
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7. NAMES AND ADDRESSE	S OF THE OFFICE	RS: ("X" BOX FOR ATTA	CHMENT)	BEFORE USING ATTAC	CHMENTS
President Name			Vice President Name		
John Rowan			Jack Devine		
Street Address			Street Address		
82-42 Penelope Ave			7304 Dupre Ave		
City	State	Zip	City	State	Zip
Middle Villiage	NY	11379	Dimondale	Ml	48821
Secretary Name			Treasurer Name		
Barry Hagge			Larry Frazee		
Street Address			Street Address		
620 Manatowny Rd			705 Montmorency Dr East		
City	State	Zip	Chy	State	Zip
Boyertown	PA	19512	Pickerington	OH	43147
8. NAMES AND ADDRESSE	S OF THE DIRECT	ORS: ("X" BOX FOR AT	TACHMENT) TILL IN SPACE	S BEFORE USING ATTA	CHMENTS
THE NUMBER OF DIRECT	ORS OF A DOMES	TIC (RHODE ISLAND) CORPORATION <u>SHALL NO</u>	T BE LESS THAN THE	EE (3). R.I.G.L. 7-6-23
Director Name			Director Name		
Patricia Bessingano			Thomas Burke		
Street Address			Street Address		
5308 W 171st Ave			1786 Hicks Ave NE		
Сйу	State	Zip	Clly!	State	Zip
Lowell	IN	46356	New Philadelphia	ОН	44663
Director Name			Director Name		
Wayne Cartier			Richard DeLong		
Street Address			Street Address		
53 Honders Way			302 Caravan Dr		
GH) ^c	State	Zip	City	State	Zip
Orrington	ME	04474	Lafayette	LA	70506
9. REGISTERED AGENT IN	•	1 •		1	•
					<u>N</u>
This information is currently	of record in the Of	fice of the Secretary of S	State. Changes require filing of F	form 641 - R.I.G.L. 7-6-1.	3/7 至 78 cs
This report mus	t be signed by eith	er the President Vice I	President, Secretary, Assistant	Secretary, Treasurer, Rec	ei 🕰 or Par
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		1 1 0	Under penalty of pe	erjury I declare and affirm	that I have extendined this
	_ /		report, including an	y accompanying schedules	
			statements containe	d here becatrue and correct	t.
File Date	ニレ゛		7.15.11		
The Dutt			Signature of Office		Date
Check No					
JEI 1 V LUII			John Rowan		
By 0152216 4:07			Print or Type Name of Officer		
CV .	7	_	President		
D OF SECRETARY OF	WILL COP ONEY		Title of Officer		