



**STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS**  
**Office of the Secretary of State - Division of Business Services**

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

**NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2012**

Filing Period: June 1 - June 30 • This report must be typed or printed legibly.

Filing Fee: \$20.00 • FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

|   |                    |   |  |                           |                          |
|---|--------------------|---|--|---------------------------|--------------------------|
| 1. Entity ID No.<br><b>107834</b>   |                    | 2. Exact name of the Corporation<br><b>MARINE CORPS LEAGUE DEPT, R.I.</b> |  |                           |                          |
| 3. State of Incorporation<br><b>R.I.</b>  |                    | 4. Corporate Address in RI - Street Address<br><b>80 ALDEN DR</b>         |  | City<br><b>W. WARWICK</b> | Zip<br><b>02893-1332</b> |
| 5. Foreign corporation. Enter principal office address<br><b>N/A</b>  |                    | City  | State  | Zip                       |                          |
| 6. Brief description of the character of business conducted in Rhode Island<br><b>MILITARY (FRATERNAL)</b>  |                    |   |  |                           |                          |
| 7. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>  |                    |   |  |                           |                          |
| President Name<br><b>FRANK BUSSICK</b>  |                    |   | Vice-President Name<br><b>JANE A DEPTULA</b> |                           |                          |
| Street Address<br><b>80 ALDEN DR</b>  |                    |   | Street Address<br><b>10 FIVE ELMS CIRCLE</b> |                           |                          |
| City<br><b>W. WARWICK</b>   | State<br><b>RI</b> | Zip<br><b>02893-1332</b>  | City<br><b>COVENTRY</b>                      | State<br><b>RI</b>        | Zip<br><b>02814</b>      |
| Secretary Name<br><b>FRANCIS P DOLAN</b>  |                    |   | Treasurer Name<br><b>FRANCIS P DOLAN</b>     |                           |                          |
| Street Address<br><b>7 O'HARE CT</b>  |                    |   | Street Address<br><b>7 O'HARE CT</b>         |                           |                          |
| City<br><b>COVENTRY</b>   | State<br><b>RI</b> | Zip<br><b>02816-4020</b>  | City<br><b>COVENTRY</b>                      | State<br><b>RI</b>        | Zip<br><b>02816-4020</b> |
| 8. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> |                    |   |  |                           |                          |
| Director Name<br><b>JOSEPH CHASSE</b>   |                    |   | Director Name<br><b>JOSEPH RAZZA</b>         |                           |                          |
| Street Address<br><b>86 FASHION DR</b>  |                    |   | Street Address<br><b>34 GLENBAOOK RD</b>     |                           |                          |
| City<br><b>WARWICK</b>  | State<br><b>RI</b> | Zip<br><b>02886-1911</b>  | City<br><b>WARWICK</b>                       | State<br><b>RI</b>        | Zip<br><b>02889-1806</b> |
| Director Name<br><b>JOSEPH F MUZZY</b>  |                    |   | Director Name<br><b>MICHAEL ZAIPO</b>        |                           |                          |
| Street Address<br><b>66 EVERILL ST.</b>   |                    |   | Street Address<br><b>5 SYLVAN DR</b>         |                           |                          |
| City<br><b>WARWICK</b>  | State<br><b>RI</b> | Zip<br><b>02889</b>   | City<br><b>E. GREENWICH</b>                  | State<br><b>RI</b>        | Zip<br><b>02818</b>      |
| 9. REGISTERED AGENT IN RHODE ISLAND   |                    |   |  |                           |                          |
| This information is currently of record in the Office of the Secretary of State. Changes require filing Form 641.   |                    |   |  |                           |                          |

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

File Date \_\_\_\_\_

Check No \_\_\_\_\_

By: \_\_\_\_\_

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**FILED**

MAY 16 2012

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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.

*Francis P Dolan*

Signature of Officer

Date

**FRANCIS P DOLAN**

Print or Type Name of Officer

*Treasurer*

Title of Officer