



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/business

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **2013**

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. 000031292		2. Exact name of the Corporation Cyclone Steam Fire Engine Company No. 2			
3. State of Incorporation RI		4. Brief description of the character of business conducted in Rhode Island Volunteer Fire Company			
5. Principal office address 7 Union Street			City Westerly	State RI	Zip 02891
President Name Keenan Homsi (Foreman)			Vice-President Name Timothy Amidon		
Street Address 58 Stillman Avenue			Street Address 31 Perkins Avenue Apt. 2		
City Pawcatuck	State CT	Zip 06379	City Westerly	State RI	Zip 02891
Secretary Name Mark Akesson			Treasurer Name Ralph Abruzzese		
Street Address 26 Ledward Avenue			Street Address 269 High Street		
City Westerly	State RI	Zip 02891	City Westerly	State RI	Zip 02891
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS. (* CHECK BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name John Martins			Director Name Ernest Muccio		
Street Address 15 Branberry Drive			Street Address 8 Hickory Lane		
City Westerly	State RI	Zip 02891	City Westerly	State RI	Zip 02891
Director Name Sam Homsi			Director Name		
Street Address 32 Seabury Drive			Street Address		
City Westerly	State RI	Zip 02891	City	State	Zip
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: _____
FOR SECRETARY OF STATE USE ONLY

FILED

MAY 30 2013

BY 3538

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.

05-22-2013

Signature of Officer

Date

Mark A. Akesson

Print or Type Name of Officer

Secretary

Title of Officer