



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. <u>27220</u>		2. Exact name of the Corporation <u>Johnson Hose Company Inc 3</u>			
3. State of Incorporation <u>RI</u>		4. Brief description of the character of business conducted in Rhode Island <u>Assist Local Charities</u>			
5. Principal office address <u>104 Greenville Ave</u>			City <u>Johnson</u>	State <u>RI</u>	Zip <u>02919</u>
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
President Name <u>Michael Vendetti</u>			Vice-President Name <u>Michael Torrelli</u>		
Street Address <u>104 Greenville Ave</u>			Street Address <u>104 Greenville Ave</u>		
City <u>Johnson</u>	State <u>RI</u>	Zip <u>02919</u>	City <u>Johnson</u>	State <u>RI</u>	Zip <u>02919</u>
Secretary Name <u>Thomas Ucci Jr</u>			Treasurer Name <u>Thomas Ucci</u>		
Street Address <u>104 Greenville Ave</u>			Street Address <u>104 Greenville Ave</u>		
City <u>Johnson</u>	State <u>RI</u>	Zip <u>02919</u>	City <u>Johnson</u>	State <u>RI</u>	Zip <u>02919</u>
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES) RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
Director Name <u>Gilbert Botelho</u>			Director Name <u>Stephen Ucci</u>		
Street Address <u>104 Greenville Ave</u>			Street Address <u>104 Greenville Ave</u>		
City <u>Johnson</u>	State <u>RI</u>	Zip <u>02919</u>	City <u>Johnson</u>	State <u>RI</u>	Zip <u>02919</u>
Director Name <u>Donkid McDougall</u>			Director Name		
Street Address <u>104 Greenville Ave</u>			Street Address		
City <u>Johnson</u>	State <u>RI</u>	Zip <u>02919</u>	City	State	Zip
8. 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

342 FILED

File Date: _____
Check No: _____
By: _____
FOR SECRETARY OF STATE USE ONLY

JUN 13 2013

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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.

Thomas Ucci Jr 6/13/2013
Signature of Officer Date

Thomas UCCI JR
Print or Type Name of Officer

Sec / Treasurer
Title of Officer