

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.	2. Exact na	Exact name of the Corporation The One Hundred (100) Club of Rhode Island 4. Brief description of the character of business conducted in Rhode Island Provide help for spouses and dependents of police and fireman killed in the line of duty				
28719	The One					
3. State of Incorporation Rhode Island	Provide					
5. Principal office address 222 Chestnut Street			City Providence	State RI	Zip 02903-4123	
LISTALL OFFICERS	NAMES AND ADDI	RESSES) ("X" BOX F	OR ATTACHMENT)	*		
President Name Brenda L. Marchwicki			Vice-President Name James J. D'Agostino			
Street Address 34 Katama Road			Street Address 60 Pine Tree Lane			
City Pawtucket	State RI	Zip 02861	City West Greenwich	State RI	Zip 02817	
Secretary Name Karen M. Senerchia			Treasurer Name Edward J. Marchwicki, Jr.			
Street Address 19 Overhill Drive			Street Address 222 Chestnut Street			
City West Warwick	State RI	Zip 02893	City Providence	State RI	Zip 02903	
LIST <u>ALL</u> DIRECTORS ("X" BOX FOR ATTACH	(NAMES AND ADD	RESSES). RHODE IS	LAND CORPORATIONS MUST LIS		THREE (3) DIRECT	
Director Name Brenda L. Marchwicki			Director Name James J. D'Agostino			
treet Address 34 Katama Road			Street Address 60 Pine Tree Lane			
ity Pawtucket	State RI	Zip 02861	City West Greenwich	State RI	Zip 02817	
Oirector Name Karen M. Senerchia			Director Name Edward J. Marchwicki, Jr.			
Street Address 19 Overhill Drive			Street Address 222 Chestnut Street			
ity Vest Warwick	State RI	Zip 02893	City Providence	State RI	Zip 02903	
. REGISTERED AGENT I			38.7	p · · ·		
his information is curren	itly of record in the	Office of the Secret	ary of State. Changes require filing	Form 641		

File Date		Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statemen		
Check No	FILED	and that all statements contained herein are true and correct. 06/13/13		
By: FOR SECRETARY OF STATE USE ONLY	JUN 1 4 2013 //09	Signature of Officer Date Edward J. Marchwicki, Jr.		
Form No. 631		Print or Type Name of Officer Treasurer		
Revised: 05/2012	/	Title of Officer		