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 name of the Corporation
28719	The One Hundred (100) Club of Rhode Island
3. State of Incorporation	4. Brief description of the character of business conducted in Rhode Island
Rhode Island	Provide help for spouses and dependents of police and fireman killed in the line of duty

5. Principal office address	City	State	Zip
222 Chestnut Street	Providence	RI	02903-4123

6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐

President Name	Street Address	City	State	Zip
Brenda L. Marchwicki	34 Katama Road	Pawtucket	RI	02861

Vice-President Name	Street Address	City	State	Zip
James J. D'Agostino	60 Pine Tree Lane	West Greenwich	RI	02817

Secretary Name	Street Address	City	State	Zip
Karen M. Senerchia	19 Overhill Drive	West Warwick	RI	02893

Treasurer Name	Street Address	City	State	Zip
Edward J. Marchwicki, Jr.	222 Chestnut Street	Providence	RI	02903

7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) ☐

Director Name	Street Address	City	State	Zip
Brenda L. Marchwicki	34 Katama Road	Pawtucket	RI	02861

Director Name	Street Address	City	State	Zip
James J. D'Agostino	60 Pine Tree Lane	West Greenwich	RI	02817

Director Name	Street Address	City	State	Zip
Karen M. Senerchia	19 Overhill Drive	West Warwick	RI	02893

Director Name	Street Address	City	State	Zip
Edward J. Marchwicki, Jr.	222 Chestnut Street	Providence	RI	02903

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

File Date _____

Check No _____

By: _____

FOR SECRETARY OF STATE USE ONLY

FILED
JUN 14 2013
BY 1109

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.

Signature of Officer — Date: 06/13/13

Edward J. Marchwicki, Jr.
Print or Type Name of Officer

Treasurer
Title of Officer

Form No. 631
Revised: 05/2012