



State of Rhode Island and Providence Plantations  
Office of the Secretary of State

Fee: \$20.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

Non-Profit Corporation  
Annual Report

Filing Period: June 1 - June 30

In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2013

1. Corporate ID No. 000029445

2. Name of Corporation The South Kingstown Firefighters Relief Association

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 16 CURTIS CIRCLE

City or Town: WAKEFIELD

State: RI

Zip: 02879

Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

TO PROVIDE RELIEF TO ITS MEMBERS OR THEIR FAMILIES IN TIME OF NEED IN ACCORDANCE WITH ITS BY-LAWS

7. Names and Addresses of the Officers and Directors:

**All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**

**THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23**

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	NATHAN T. STREET	189 POINT JUDITH ROAD NARRAGANSETT, RI 02882 USA
TREASURER	MICHAEL GEORTE MARTIN	16 CURTIS CIR SOUTH KINGSTOWN, RI 02879 USA

DIRECTOR	DENNIS BERMIER	PO BOX 692 WAKEFIELD, RI 02879 USA
DIRECTOR	JOHN NEILSON	29 DAWLEY WAY WAKEFIELD, RI 02879 USA
DIRECTOR	HILDING T. MUNSON	123 GOOSEBERRY ROAD SOUTH KINGSTOWN, RI 02879 USA

**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER**  
**Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

MICHAEL G. MARTIN 16 CURTIS CIRCLE SOUTH KINGSTOWN , RI 02879

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

**Signed this 18 Day of June, 2013 at 7:35:26 PM.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By MICHAEL G. MARTIN  
Signature of Officer of the Corporation

☐ President or ☐ Vice President or ☐ Secretary or ☐ Assistant Secretary or  
☒ Treasurer or ☐ Receiver or ☐ Trustee (check one)

**This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in Section 7.**

Form No. 631  
Revised 09/07

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