



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

2013 JUL 30 PM 2:13
SECRETARY OF STATE
CORPORATIONS DIV

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. 0000 74559		2. Exact name of the Corporation BLUE KNIGHTS OF RI, CHAPTER 1, INC.	
3. State of Incorporation RI		4. Brief description of the character of business conducted in Rhode Island Promote motorcycle Safety and to raise and Donate money to Different Charities	
5. Principal office address P.O. Box 8296		City Warwick	State RI
		Zip 02888	
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) (X) BOX FOR ATTACHMENT			
President Name KENNETH PENZA		Vice-President Name Paul Caianello	
Street Address 276 Woodward Rd		Street Address 4 Jasmine Ct.	
City Prov	State RI	Zip 02904	City Coventry
			State RI
			Zip 02816
Secretary Name Alan Bernillard		Treasurer Name George Quinlan	
Street Address 3150 Cranston St		Street Address 106 Whispering Pine Way	
City Cranston	State RI	Zip 02920	City EXETER
			State RI
			Zip 02822
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES) RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS (X) BOX FOR ATTACHMENT			
Director Name Albert Tombs		Director Name John Joseph	
Street Address 105 Ohio Ave		Street Address 295 Stillwater Rd	
City Prov.	State RI	Zip 02905	City Smithfield
			State RI
			Zip 02917
Director Name John DeCubellis		Director Name (Past President) John O'Donnell	
Street Address 231 High St		Street Address 168 Falcon Ave	
City WAKEFIELD	State RI	Zip 02879	City Warwick
			State RI
			Zip 02888
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

FILED

JUL 30 2013

202848

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
KENNETH R. PENZA
Print or Type Name of Officer

Date

7-30-13

Pres.

File Date

Check No

By

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