



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: 2014

1. Corporate ID No. 000030638

2. Name of Corporation RHODE ISLAND POLICE CHIEFS ASSOCIATION, INC.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 250 CONANICUS AVENUE

City or Town: JAMESTOWN

State: RI Zip: 02835 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

NON PROFIT, HANDLING THE AFFAIRS OF THE POLICE ASSOCIATION.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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 First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	ELWOOD JOHNSON	250 CONANICUS AVE JAMESTOWN, RI 02835 USA
TREASURER	EDWARD MELLO	PO BOX 45 JAMESTOWN, RI 02835 USA
DIRECTOR	BRIAN SULLIVAN	100 OLD RIVER ROAD/LINCOLN POLICE

		LINCOLN, RI 02865 USA
DIRECTOR	SIDNEY WORDELL	250 CONANICUS AVE JAMESTOWN, RI 02835 USA
DIRECTOR	JOSEPH TAVARES	250 CONANICUS AVE JAMESTOWN, RI 02835 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

THOMAS P. TIGHE 250 CONANICUS AVENUE JAMESTOWN , RI 02835

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

Signed this 30 Day of April, 2014 at 9:36:40 AM by the authorized person. 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 company, 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 EDWARD MELLO
Signature of Authorized Person

Form No. 631
Revised 09/07

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