



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

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2014

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. 100331		2. Exact name of the Corporation Rhode Island State Police Museum Foundation, Inc.			
3. State of Incorporation Rhode Island		4. Brief description of the character of business conducted in Rhode Island Museum to honor the service of members of the Rhode Island State Police and preserve the Division's history.			
5. Principal office address 311 Danielson Pike		City North Scituate	State RI	Zip 02857	
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐					
President Name David P. Tikoian		Vice-President Name Kevin M. O'Brien			
Street Address 311 Danielson Pike		Street Address 311 Danielson Pike			
City North Scituate	State RI	Zip 02857	City North Scituate	State RI	Zip 02857
Secretary Name Barbara J. Laird		Treasurer Name Dawn M. Petrone			
Street Address 311 Danielson Pike		Street Address 311 Danielson Pike			
City North Scituate	State RI	Zip 02857	City North Scituate	State RI	Zip 02857
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS <u>MUST</u> LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) ☒					
Director Name Robert E. Kenahan		Director Name James T. Beck			
Street Address 50 Riverdale Road		Street Address 83 Winterberry Road			
City Westerly	State RI	Zip 02891	City Narragansett	State RI	Zip 02874
Director Name Cynthia A. Armour-Coyne		Director Name Robert S. Wall			
Street Address 8 Newbrook Drive		Street Address 311 Danielson Pike			
City Barrington	State RI	Zip 02806	City North Scituate	State RI	Zip 02857
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, duly Authorized Representative, Receiver or Trustee

File Date _____

Check No _____

By: _____

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FILED

MAY 05 2014

BY 12605

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.

David P. Tikoian 4/29/2014
Signature of Officer or Authorized Representative Date

David P. Tikoian

Print or Type Name of Officer or Authorized Representative

7. *Directors (continued)*

Nicholas J. Messinger
311 Danielson Pike
North Scituate, RI 02857

Louis J. Fiorenzano
311 Danielson Pike
North Scituate, RI 02857

Daniel S. O'Neil
311 Danielson Pike
North Scituate, RI 02857