



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

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2014

Filing Period: June 1 - June 30 • Filing Fee: \$20.00* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY.

* 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.

1. Corporate ID No. 26969		2. Name of Corporation BAGGIO LOCCI POST 172 VETERANS OF FATIGUED WARS OF THE UNITED STATES	
3. State of Incorporation R.I.		4. Corporate address in Rhode Island - Street Address 22 WINTER ST.	
5. Foreign corporation. Enter principal office address		City Providence	Zip 02903
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island V.F.W. Post 172 (Club)			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name ALFREDO PALICCIA		Vice President Name VINCENT PISANELLI	
Street Address 22 WINTER ST		Street Address 127 FARMING AVE.	
City Providence	State R.I.	City CRASTON	State R.I.
Zip 02903		Zip 02920	
Secretary Name RALPH PAPERELLA		Treasurer Name CHRISTOPHER DELL'AVVENTURA	
Street Address 61 WAMPANAGG TRI		Street Address 710 ATWELLS AVE	
City Riverside	State R.I.	City Providence	State R.I.
Zip 02915		Zip 02909	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS			
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23			
Director Name DELPHINO SILVIA		Director Name RONALD SANTOMASSIMO	
Street Address 42 AIRPORT RD.		Street Address 100 BROAD ST.	
City COVENTRY	State R.I.	City Providence	State R.I.
Zip 02911		Zip 02903	
Director Name RAYMOND MARTINEAU		Director Name	
Street Address 12 SAINT THOMAS ST.		Street Address	
City NORTH PROV.	State R.I.	City	State
Zip 02911		Zip	
9. REGISTERED AGENT IN RHODE ISLAND			
This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-78			

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

FILED

JUN 03 2014

File Date	BY 1440
Check No.	
By:	
FOR SECRETARY OF STATE USE ONLY	

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.

Vincent Pisanelli
Signature of Officer
VINCENT PISANELLI
Print or Type Name of Officer
Vice Commander
Title of Officer