



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.** 000109428

**2. Name of Corporation** RHODE ISLAND VENDING ASSOCIATION, INC.

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 849 UNION STREET

City or Town: PORTSMOUTH State: RI Zip: 02871 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 PROMOTE THE COMMON BUSINESS INTEREST AND GENERAL WELFARE OF THE  
AUTOMATIC MERCHANDISING INDUSTRY IN THE STATE OF RHODE ISLAND.

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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
PRESIDENT	WILLIAM CARAGIANIS	849 UNION STREET PORTSMOUTH, RI 02871- USA
VICE PRESIDENT	BRIAN FOLEY	180 KERRY PLACE NORWOOD, MA 02062 USA

DIRECTOR	JAMES WATERMAN MR	45 WILCLAR ST WARWICK, RI 02886 USA
DIRECTOR	PHIL BOULEY	232 VANDERBILT AVENUE NORWOOD, MA 02067 USA
DIRECTOR	JIM ROSELANDO MR	97 BEAVER STREET WALTHAM, MA 02453 US

**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**

WILLIAM CARAGIANIS 849 UNION STREET PORTSMOUTH , RI 02871

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

**Signed this 15 Day of July, 2014 at 11:29:00 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 WILLIAM CARAGIANIS  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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