

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. 000061349

2. Name of Corporation SAFETY ASSOCIATION OF RHODE ISLAND, INC.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: P.O. BOX 6606

City or Town: PROVIDENCE State: RI Zip: 02940 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 AND DEVELOP A POSITIVE EXCHANGE OF IDEAS AND EXPERIENCE REGARDING THE PROVISION OF A SAFE WORKING ENVIRONMENT

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	ROBERT J GALLAGHER	180 EAST SHORE ROAD JAMESTOWN, RI 02835 USA
VICE PRESIDENT	JOHN BERNARDO	55 CARLTON AVE. WARWICK, RI 02889 USA

TREASURER	JOHNELL NORTON	61 WINTON STREET CRANSTON, RI 02910 USA
SECRETARY	JANINE PITOCCO	743 REYNOLDS ROAD WEST GLOCESTER, RI 02814 USA
DIRECTOR	JOSEPH WERBICKI	PO BOX 6606 PROVIDENCE, RI 02940 USA
DIRECTOR	JASON LAVOIE	50 BELVER AVENUE NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	RAYMOND ANTONELLI	91 HOLLYHOCK DRIVE CRANSTON, RI 02920 USA
DIRECTOR	PAUL SIMPSON	P.O. BOX 6606 PROVIDENCE, RI 02940 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

ROBERT J. GALLAGHER 180 EAST SHORE ROAD JAMESTOWN, RI 02835

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

Signed this 25 Day of November, 2014 at 8:30:39 PM 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 <u>ROBERT J. GALLAGHER</u> Signature of Authorized Person

Form No. 631 Revised 09/07

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