



**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. <b>13964</b> <i>139684</i>		2. Exact name of the Corporation <b>Teamsters local 251 retirees chapter</b>			
3. State of Incorporation <b>R.I.</b>		4. Brief description of the character of business conducted in Rhode Island <b>To promote the principals, an advocacy for retirees.</b>			
5. Principal office address <b>121 Brightbridge Ave</b>			City <b>East Providence</b>	State <b>RI</b>	Zip <b>02914</b>
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name <b>Michael Parrillo</b>			Vice-President Name <b>Raymond Grilli</b>		
Street Address <b>14 Silina</b>			Street Address <b>11 Brookfield</b>		
City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</b>	City <b>Providence</b>	State <b>RI</b>	Zip <b>02909</b>
Secretary Name <b>Paul Griffin</b>			Treasurer Name <b>Alphonse Crudale</b>		
Street Address <b>140 Bayview Ave</b>			Street Address <b>100 Budlong Rd.</b>		
City <b>Cranston</b>	State <b>RI</b>	Zip <b>02905</b>	City <b>Cranston</b>	State <b>RI</b>	Zip <b>02920</b>
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name <b>Michael Machon</b>			Director Name <b>Bruce Bromley</b>		
Street Address <b>67 Gorham Ave</b>			Street Address <b>11 Gorge Allen Rd.</b>		
City <b>Warwick</b>	State <b>RI</b>	Zip <b>02988</b>	City <b>Chepachet</b>	State <b>RI</b>	Zip <b>02814</b>
Director Name <b>Peter Taborelli</b>			Director Name		
Street Address <b>15 Wenscott Rd</b>			Street Address		
City <b>North Providence</b>	State <b>RI</b>	Zip <b>02904</b>	City	State	Zip
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

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.

File Date \_\_\_\_\_

Check No \_\_\_\_\_

By: \_\_\_\_\_

FOR SECRETARY OF STATE USE ONLY

FILED

DEC 24 2014

*Alphonse E. Crudale Jr.* 12/23/14  
 Signature of Officer or Authorized Representative Date

BY 10/10 *Alphonse E. Crudale Jr.*  
 Print or Type Name of Officer or Authorized Representative