



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:** 2015

**1. Corporate ID No.** 000026366

**2. Name of Corporation** American Legion, West Warwick Post

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 2 LEGION WAY

City or Town: WEST WARWICK State: RI Zip: 02893 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**

VETERANS SERVICES AND CHARITABLE PROGRAMS.

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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 First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	RAY BOTT	555 DAVISVILLE ROAD NORTH KINGSTOWN, RI 02852 USA
TREASURER	ROBERT C. SHIERSCHMIDT	229 E. GREENWICH AVE W. WARWICK, RI 02893 US
DIRECTOR	SONYA LAVOIE	421 TIOGUE AVENUE

		COVENTRY, RI 02816 USA
DIRECTOR	CHARLES EDWARD PETRARCA JR	14 YOUNGS AVE W. WARWICK, RI 02893 US
DIRECTOR	ERNEST R. KISSINGER	3 PARK BLVD W. WARWICK, RI 02893 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**

CHARLES E. PETRARCA, JR. 2 LEGION WAY WEST WARWICK , RI 02893

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

**Signed this 5 Day of May, 2015 at 9:18:14 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 CHARLES E. PETRARCA JR  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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