



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 **2015**

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. 26595		2. Exact name of the Corporation Hopkins Hill Road Fire District			
3. State of Incorporation Rhode Island		4. Brief description of the character of business conducted in Rhode Island Paying the expenses of the Hopkins Hill Fire Dept. and Hopkins Hill Fire District			
5. Principal office address 1 Bestwick Trail		City Coventry		State RI	Zip 02816
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☒					
President Name Chairperson Daniel Danis		Vice-President Name Vice-Chairperson Kenneth Burdick			
Street Address 3 Angelwood Drive		Street Address 18 Noella Avenue			
City Coventry	State RI	Zip 02816	City Coventry	State RI	Zip 02816
Secretary Name Clerk Carol Dion		Treasurer Name Caryl Moore			
Street Address 222 Hopkins Hill Road		Street Address 52 Lorraine Avenue			
City Coventry	State RI	Zip 02816	City Coventry	State RI	Zip 02816
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) ☒					
Director Name Daniel Danis		Director Name Kenneth Burdick			
Street Address 3 Angelwood Drive		Street Address 18 Noella Avenue			
City Coventry	State RI	Zip 02816	City Coventry	State RI	Zip 02816
Director Name Carol Dion		Director Name Caryl Moore			
Street Address 222 Hopkins Hill Road		Street Address 52 Lorraine Avenue			
City Coventry	State RI	Zip 02816	City Coventry	State RI	Zip 02816
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

File Date _____

Check No _____

By: _____

FOR SECRETARY OF STATE USE ONLY

FILED

JUN 04 2015

BY

18118

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.

Carol Dion 6/1/15
Signature of Officer or Authorized Representative Date

CAROL Dion
Print or Type Name of Officer or Authorized Representative

HOPKINS HILL ROAD FIRE DISTRICT

ENTITY ID # 26595

ATTACHMENT FOR NAMES AND ADDRESSES OF OFFICERS:

TAX COLLECTOR

**DENISE BROWN
23 LINWOOD DRIVE
COVENTRY, RI 02816**

HEAD TAX ASSESSOR

**DENISE DEGRAIDE
27 LINWOOD DRIVE
COVENTRY, RI 02816**

MEMBER AT LARGE

**JOSEPH ST. JEAN
91 HELEN AVENUE
COVENTRY, RI 02816**

ATTACHMENT FOR NAMES AND ADDRESSES OF DIRECTORS:

**DENISE BROWN
23 LINWOOD AVENUE
COVENTRY, RI 02816**

**DENISE DEGRAIDE
27 LINWOOD DRIVE
COVENTRY, RI 02816**

**JOSEPH ST. JEAN
91 HELEN AVENUE
COVENTRY, RI 02816**

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