



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 2001

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.<br><b>000029792</b>                                                                                                                                           |                    | 2. Exact name of the Corporation<br><b>Rhode Island Commodores</b>          |                                             |                     |                     |
| 3. State of Incorporation<br><b>R.I</b>                                                                                                                                        |                    | 4. Brief description of the character of business conducted in Rhode Island |                                             |                     |                     |
| 5. Principal office address<br><b>315 Iron Horse Way Suite 101</b>                                                                                                             |                    | City<br><b>Providence</b>                                                   | State<br><b>RI</b>                          | Zip<br><b>02908</b> |                     |
| 6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>                                                                                   |                    |                                                                             |                                             |                     |                     |
| President Name<br><b>Colin P. Kane</b>                                                                                                                                         |                    |                                                                             | Vice-President Name<br><b>Stefan Pryor</b>  |                     |                     |
| Street Address<br><b>20 Newman Ave</b>                                                                                                                                         |                    |                                                                             | Street Address<br><b>State House</b>        |                     |                     |
| City<br><b>East Providence</b>                                                                                                                                                 | State<br><b>RI</b> | Zip<br><b>02916</b>                                                         | City<br><b>Providence</b>                   | State<br><b>RI</b>  | Zip<br><b>02903</b> |
| Secretary Name<br><b>David DeFerrillo</b>                                                                                                                                      |                    |                                                                             | Treasurer Name<br><b>Harry Baird</b>        |                     |                     |
| Street Address<br><b>315 Iron Horse Way Suite 101</b>                                                                                                                          |                    |                                                                             | Street Address<br><b>409 West Reach Dr.</b> |                     |                     |
| City<br><b>Providence</b>                                                                                                                                                      | State<br><b>RI</b> | Zip<br><b>02908</b>                                                         | City<br><b>Jamestown</b>                    | State<br><b>RI</b>  | Zip<br><b>02835</b> |
| 7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> |                    |                                                                             |                                             |                     |                     |
| Director Name                                                                                                                                                                  |                    |                                                                             | Director Name                               |                     |                     |
| Street Address                                                                                                                                                                 |                    |                                                                             | Street Address                              |                     |                     |
| City                                                                                                                                                                           | State              | Zip                                                                         | City                                        | State               | Zip                 |
| Director Name                                                                                                                                                                  |                    |                                                                             | Director Name                               |                     |                     |
| Street Address                                                                                                                                                                 |                    |                                                                             | Street Address                              |                     |                     |
| City                                                                                                                                                                           | State              | Zip                                                                         | 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

FILED

JUN 26 2015

|                                 |                            |
|---------------------------------|----------------------------|
| File Date                       |                            |
| Check No.                       |                            |
| By:                             | <b>David C. DeFerrillo</b> |
| FOR SECRETARY OF STATE USE ONLY |                            |

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.

Signature of Officer or Authorized Representative **David C. DeFerrillo** Date **6/27/15**

Print or Type Name of Officer or Authorized Representative **David C. DeFerrillo**

## Rhode Island Commodores – 2015 Board of Governors

Colin P. Kane, *Admiral*  
Principal, Peregrine Group LLC

Stefan Pryor, Vice Admiral  
Secretary of Commerce

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Business Advisors of R.I., Inc

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Johnson & Wales University

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Gilbane, Inc.

Dr. Nancy Carriuolo, *President*  
Rhode Island College

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President, Head of Corporate Affairs*  
Citizens Financial Group

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Officer & Executive Director*  
Preservation Society of Newport  
County

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Verizon

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Director*  
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University of Rhode Island

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Vice President, External Affairs*  
First Wind

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Hassenfeld Family Initiatives

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Embolden

Kathleen C. Hittner, *Commissioner*  
Office of The Health Insurance  
Commissioner

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*President & Providence Mutual Fire  
Insurance Co.*

Mr. Michael F. Ryan,  
*Regional President*  
*National Grid*  
Mr. Neil D. Steinberg, *President &  
CEO*  
The Rhode Island Foundation

Ms. Laurie White, *President*  
Greater Providence Chamber of  
Commerce

Mr. James R. Winoker, *CEO*  
*Belvoir Properties, Inc.*

Mr. David C. DePetrillo,  
*Flag Secretary*  
RI Commodores