



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02903-1335
(401) 222-3000

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: June 1 - June 30 • Filing Fee: \$20.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 28400		2. Name of Corporation The Oakland Beach Volunteer Fire Company			
3. State of Incorporation RHODE ISLAND		4. Corporate address in Rhode Island - Street Address 645 OAKLAND BEACH AVE		City WARWICK	Zip 02886
5. Foreign corporation. Enter principal office address 645 OAKLAND BEACH AVE			City WARWICK	State RI	Zip 02886
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island PRIVATE CLUB WITH AUXILIARY-SPONSOR LOCL CHARITIES AND SPORT TEAMS					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name RONALD V. MAUFREDO			Vice President Name WILLIAM BUCCINI		
Street Address 3070 WEST SHORE RD			Street Address 30 LOGAN ST		
City WARWICK	State RI	Zip 02886	City WARWICK	State RI	Zip 02886
Secretary Name THOMAS FISHER			Treasurer Name ROBERT HUTCHINSON		
Street Address 130 HARBOR VIEW			Street Address 227 ARLINGTON AVE		
City WARWICK	State RI	Zip 02889	City WARWICK	State RI	Zip 02889
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23					
Director Name KEN HUDSON			Director Name NORM DION		
Street Address 32 PHEASANT AVE			Street Address 137 COBORN ST		
City WARWICK	State RI	Zip 02886	City WARWICK	State RI	Zip 02886
Director Name WILLIAM LUCAS			Director Name		
Street Address 210 HORSENECK AVE			Street Address		
City WARWICK	State RI	Zip 02886	City	State	Zip
9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78					
Agent Name ROBERT J. HUTCHINSON			Address 227 ARLINGTON AVENUE		
Address 645 OAKLAND BEACH AVENUE			City WARWICK	Zip 02886	

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



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File Date 6/18/04
Check No. 10969
By: W.
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.

Ronald V. Maufredo 6/18/04
Signature of Officer Date
RONALD V. MAUFREDO
Print or Type Name of Officer
President
Title of Officer