



**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: 2016

1. Corporate ID No. 000026191

2. Name of Corporation HARNOIS-BARNABE-AREL AMVETS CLUB

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 842 SOCIAL STREET

City or Town: WOONSOCKET

State: RI Zip: 02895 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

VETERAN MEETINGS & FUNCTIONS

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	ROBERT GAUVIN	122 CHESTER ST. WOONSOCKET, RI 02895 USA
TREASURER	RONALD H BENNETT	216 WOOD AVE. WOONSOCKET, RI 02895 USA
SECRETARY	CHARLES MCCARTHY	260 SECOND AVE.

		WOONSOCKET, RI 02895 USA
DIRECTOR	RICHARD DUMAIS	33 SECOND AV. CUMBERLAND, RI 02864 USA
DIRECTOR	ROBERT GAUVIN	122 CHESTER ST. WOONSOCKET, RI 02895 USA
DIRECTOR	MAURICE CHAMBERLAND	2970 MENDON RD. APT. 90 CUMBERLAND, RI 02864 USA

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

PAUL A. PARENTEAU 842 SOCIAL STREET WOONSOCKET , RI 02895

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

Signed this 26 Day of May, 2016 at 12:54:58 PM 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 RONALD H. BENNETT
Signature of Authorized Person

Form No. 631
Revised 09/07

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