



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. 000799973

2. Name of Corporation RI AFT/R Local 8037r

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 211 OAKWOODS DRIVE

City or Town: WAKEFIELD

State: RI Zip: 02879 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

EDUCATIONAL, SOCIAL, ADVOCACY SERVICES TO RETIREE MEMBERS OF THE ORGANIZATION

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	ROGER P BOUDREAU	211 OAKWOODS DRIVE WAKEFIELD, RI 02879 USA
TREASURER	PAULA CAIOZZO	46 TENNYSON RD. CRANSTON, RI 02910 USA

SECRETARY	ARLENE NAPPA	39 REYNOLDS AVE. WARWICK, RI 02889 USA
VICE PRESIDENT	MARCIA REBACK	88 JOHN ST. PROVIDENCE, RI 02906 USA
DIRECTOR	JANICE SANTOS	25 RIVERDELL DR. SAUDERSTOWN, RI 02874 USA
DIRECTOR	LOUISE ROSA	60 HAWTHORNE PL. N. PROVIDENCE, RI 02904 USA
DIRECTOR	MARK KURTZMAN	47 DOUGLAS CIR. GREENVILLE, RI 02828 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**

ROGER P. BOUDREAU 211 OAKWOODS DRIVE WAKEFIELD , RI 02879

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

Signed this 27 Day of May, 2016 at 9:20:16 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 ROGER P. BOUDREAU
Signature of Authorized Person

Form No. 631
Revised 09/07

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