



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

Foreign Non-Profit
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. 001028373

2. Name of Corporation Veterans Inc.

3. State of Incorporation

State: MA

4. Corporate Address in Rhode Island

No. and Street: 69 GROVE STREET

City or Town: WORCESTER

State: RI

Zip: 01605

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

TO PROVIDE HOUSING, TRAINING, EMPLOYMENT, OUTREACH AND SUPPORTIVE SERVICES TO VETERANS, SERVICE MEMBERS AND THEIR FAMILIES

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	VINCENT J. PERRONE	72 COLUMBUS ROAD BOYLSTON, MA 01505 USA
TREASURER	GEORGE BOURISK	22 SUNRISE AVE GRAFTON, MA 01519 USA
VICE PRESIDENT	DENIS LEARY	10 HOLLY LANE SHREWSBURY, MA 01545 USA
CLERK	ROLAND BERCUME	6 ORLANDO AVE

		WORCESTER, MA 01605 USA
ASSITANT TREASUER	ALLISON ALAIMO	216 LAKE AVE WORCESTER, MA 01604 USA
DIRECTOR	VICTORIA VITUCCI	33 MARTIN ROAD CONCORD, MA 00000 USA
DIRECTOR	PATRICK MURPHY	2 FITZGERALD LANE SOUTHBOROUGH, MA 01772 USA
DIRECTOR	EDWARD D BURKART JR	15 ISABEL CIRCLE MONTPELIER, VT 05602 USA
DIRECTOR	S SAM SLEP	29 JAY ST EAST HARTFORD, CT 06118 USA
DIRECTOR	BARBARA RUGO FOCHT MD	28 GRAFTON COMMON GRAFTON, MA 01519 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**

JENNIFER ALLEN 1070 MAIN STREET PAWTUCKET , RI 02860

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

Signed this 31 Day of May, 2016 at 12:12:45 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 WAYNE PARIS
Signature of Authorized Person

Form No. 631
Revised 09/07