



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. 000056464

2. Name of Corporation Rhode Island Public Works Association, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 93 SMALLPOX TRAIL

City or Town: WEST KINGSTON

State: RI Zip: 02892 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

A FRATERNAL ORGANIZATION OF STATE AND MUNICIPAL EMPLOYEES

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	TOM OLOUGHLIN	19 BERKELEY AVENUE MIDDLETOWN, RI 02842 USA
TREASURER	WILLIAM RICCIO	280 SPRING ST NEWPORT, RI 02840 USA
SECRETARY	STEPHEN MATTSHECK	175 SO COUNTY TRAIL

		EXETER, RI 02822 USA
EXECUTIVE DIRECTOR	GARY T TEDESCHI	93 SMALL POX TR RICHMOND, RI 02892 USA
DIRECTOR	SCOTT W. BARBER	51 BUTTONWOODS ROAD WYOMING, RI 02896 USA
DIRECTOR	TOM OLOUGHLIN	19 BERKELEY AV MIDDLETOWN, RI 02842 USA
DIRECTOR	STEPHEN MATTSHECK	175 SO COUNTY TRAIL EXETER, RI 02822 USA
DIRECTOR	WILLIAM RICCIO	280 SPRING ST NEWPORT, RI 02840 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

KAREN R. ELLSWORTH 180 MATUNUCK SCHOOL HOUSE ROAD 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 17 Day of June, 2016 at 1:37:51 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 GARY T TEDESCHI
Signature of Authorized Person

Form No. 631
Revised 09/07