



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2016

Filing Period: June 1 - June 30 • **Filing Fee:** \$20.00* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

* 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.

1. Corporate ID No. 28659		2. Name of Corporation PROVIDENCE POLICE ASSOCIATION	
3. State of Incorporation R.I.		4. Corporate address in Rhode Island - Street Address 325 WASHINGTON ST.	
		City PROVIDENCE	Zip 02905
5. Foreign corporation. Enter principal office address		City	State
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island TO PAY DEATH AND SICK BENEFITS TO MEMBERS AND THEIR DEPENDENTS			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name John EGAN Sr.		Vice President Name John McGehearty	
Street Address 108 BALSAM Rd.		Street Address 26 Larkwood Ave.	
City So. KINGSTON	State R.I.	City PROVIDENCE	State R.I.
Zip 02879		Zip 02908	
Secretary Name MARTIN F. Names		Treasurer Name John McCaughey	
Street Address 126 ALBERT Ave		Street Address 28 DALLIA ST	
City CRANSTON	State R.I.	City WARWICK	State R.I.
Zip 02905		Zip 02888	
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 RAYMOND RING		Director Name MARTIN W. Names	
Street Address 71 LEYNON ST.		Street Address 25 MARDUM CT. UNIT #21	
City PROVIDENCE	State R.I.	City SMITHFIELD	State R.I.
Zip 02908		Zip 02917	
Director Name NORMAN ARSENAULT		Director Name	
Street Address 37 ARMINGTON Ave.		Street Address	
City PROVIDENCE	State R.I.	City	State
Zip 02908			
9. REGISTERED AGENT IN RHODE ISLAND			
This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 641 - R.I.G.L. 7-6-137-628			

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

FILED

JUN 29 2016

BY CA 277932

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.

Martin F. Names 6/15/16
Signature of Officer Date

MARTIN F. Names
Print or Type Name of Officer

SECRETARY
Title of Officer

File Date _____

Check No. _____

By: _____

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