



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.** 000026359

**2. Name of Corporation** The American Legion, East Greenwich Post No. 15

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: 1016 MAIN STREET  
P.O. BOX 181

City or Town: EAST GREENWICH State: RI Zip: 02818 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**

AMERICAN LEGION NON PROFIT ASSOCIATION

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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	JOHN D HOLMES	251 BEACHWOOD DRIVE EAST GREENWICH, RI 02818 USA
DIRECTOR	ARTHUR S WATSON	17 ROBERT AVENUE EAST GREENWICH, RI 02818 USA

DIRECTOR	LEO BANNISTER	80 RESERVOIR COVENTRY, RI 02816 USA
DIRECTOR	GREG PALMER	274 MOOSEHORN ROAD EAST GREENWICH, RI 02818 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**

GREG PALMER 1016 MAIN STREET EAST GREENWICH , RI 02818

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

**Signed this 5 Day of July, 2016 at 10:10:14 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 GREGORY PALMER  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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