



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040 | Email: corporations@sos.ri.gov | Website: www.sos.ri.gov

Non-Profit Corporation Annual Report for the year: 2016

Filing period: June 1 - June 30

Filing Fee: \$20.00 *FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID Number		2. Exact name of the Corporation			
1657776		R. I. C. E. F.			
3. State of Incorporation		4. Brief description of the character of business conducted in Rhode Island			
R. I.		To promote the improvement of public health through the practice of chiropractic health care			
5. Principal Office Address		City	State	Zip	
160 Pleasant Street		Rumford	RI	02916	
6. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name		Vice-President Name			
Clive W. Bridgman					
Street Address		Street Address			
160 Pleasant St					
City	State	Zip	City	State	Zip
Rumford	RI	02916			
Secretary Name		Treasurer Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
7. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment ☐					
Director Name		Director Name			
David Dwyer		Paul O'Brien			
Street Address		Street Address			
189 Tollgate Rd		291 Waterman Ave Street			
City	State	Zip	City	State	Zip
Warrick	RI	02885	Providence	RI	02906
Director Name		Director Name			
David A. Rasao					
Street Address		Street Address			
655 Mendon Road					
City	State	Zip	City	State	Zip
Cumberland	RI	02864			
8. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
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.					
This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.					
Name of Officer/Authorized Representative				Date	
Clive W. Bridgman, D.C.				07/13/2016	
Signature of Officer/Authorized Representative					
					

FILED

JUL 18 2016

By

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ID