



**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:** 2017

**1. Corporate ID No.** 000307111

**2. Name of Corporation** PCO PROGRAM, INC.

**3. State of Incorporation**

State: RI

**ARTICLE III**

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code   
813910

**4. Corporate Address in Rhode Island**

No. and Street: 225 METROCENTER BLVD  
City or Town: WARWICK State: RI Zip: 02886 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 PURCHASE LIABILITY INSURANCE AS A GROUP, TO INSTITUTE RISK  
MANAGEMENT AND LOSS PREVENTION PROGRAMS FOR CORPORATION MEMBERS

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	SCOTT BELL	1065 AVE OF AMERICAS NEW YORK, NY 10018 USA
TREASURER	TOM TRAN	1065 AVE OF AMERICAS NEW YORK, NY 10018 USA
SECRETARY	FREDERICA O'CONNOR	100 SUNNYSIDE BLVD WOODBURY , NY 11797 USA
VICE PRESIDENT	JANE A WILLIAMS	225 METRO CENTER BLVD WARWICK , RI 02886 USA
DIRECTOR	JANE A WILLIAMS	225 METRO CENTER BLVD. WARWICK, RI 02886 USA
DIRECTOR	FREDERICA OCONNOR	100 SUNNYSIDE BLVD. WOODBURY , NY 11797 USA
DIRECTOR	SCOTT BELL	1065 AVENUE OF THE AMERICAS NEW YORK, NY 10018 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**

JANE A. WILLIAMS 225 METRO CENTER BOULEVARD WARWICK , RI 02886

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

**Signed this 30 Day of June, 2017 at 11:00:44 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 TOM TRAN  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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