



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

Annual Report for the year: 2018

Non-Profit Corporation

→ Filing period: June 1 - June 30

→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by July 30.

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SECRETARY OF STATE
CORPORATIONS DIV.

2018 FEB 28 PM 2:28

1. Entity ID Number 112254		2. Exact name of the Corporation military Police Regimental Association of Rhode Island	
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island to Promote the social welfare of the military community and the common good.	
4. NAICS Code 928110			
6. Principal Office Address 541 Airport Rd		City Warwick	State RI
		Zip 02886	
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐			
President Name Sean Fitzpatrick		Vice-President Name Richard McMahon	
Street Address 65 ten Rod Rd		Street Address 65 Ten Rod Rd	
City N. Kingstown	State RI	City N. Kingstown	State RI
Zip 02852		Zip 02852	
Secretary Name Derek Chobanian		Treasurer Name Ross Boehm	
Street Address 104 Reed Ave		Street Address 58 S. main St.	
City Coventry	State RI	City Coventry	State RI
Zip 02816		Zip 02816	
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment ☐			
Director Name Richard Valente		Director Name Nicole Hustleston	
Street Address 35 Barden Lane		Street Address 41 edgewood Rd	
City Warren	State RI	City Chepachet	State RI
Zip 02879		Zip 02814	
Director Name Kevin McBride		Director Name Michael Riley	
Street Address 35 Pond St		Street Address 1167 Ticonderoga Dr.	
City Rehobeth	State MA	City Warwick	State RI
Zip 02769		Zip 02886	
9. 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.			
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>			
Name of Officer/Authorized Representative Ross K. Boehm			Date 2/28/2018
Signature of Officer/Authorized Representative 			FILED SIGN DOCUMENT HERE

FEB 28 2018

BY **C2011390**

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