



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

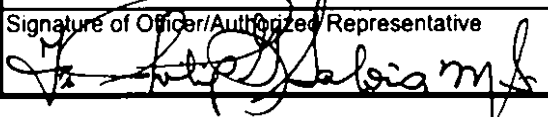
**Annual Report for the year: 2018**

**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.

1. Entity ID Number <b>103967</b>		2. Exact name of the Corporation <b>Vietnam Veterans of America - Chapter #818</b>			
3. State of Incorporation <b>Rhode Island</b>		5. Brief description of the character of business conducted in Rhode Island <b>Veteran Service Organization designed to help veterans and their family members in the their time of need especially around the topic of Veteran Benefits and Veteran Healthcare issues. The organization also provides scholarships to eligible offspring of this members.</b>			
4. NAICS Code <b>813212 - Voluntary Health O</b> <input type="checkbox"/>					
6. Principal Office Address <b>Post Office Bx 818</b>		City <b>Woonsocket</b>	State <b>RI</b>	Zip <b>02895-0818</b>	
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>Father Philip G. Salois, M.S.</b>			Vice-President Name <b>David E. Smith, CSM.Ret.</b>		
Street Address <b>16 Sharon Parkway</b>			Street Address <b>321 Albion Road</b>		
City <b>North Smithfield</b>	State <b>RI</b>	Zip <b>02896-6930</b>	City <b>Lincoln</b>	State <b>RI</b>	Zip <b>02865-4282</b>
Secretary Name <b>Donald T. Godin</b>			Treasurer Name <b>Leo A. Turgeon</b>		
Street Address <b>11 Illinois Street</b>			Street Address <b>172 Rutland Street</b>		
City <b>Central Falls</b>	State <b>RI</b>	Zip <b>02862-2702</b>	City <b>Woonsocket</b>	State <b>RI</b>	Zip <b>02895-2217</b>
8. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>Kenneth A. Howe</b>			Director Name <b>Ernest S. Bolsvert</b>		
Street Address <b>199 Sayles Avenue</b>			Street Address <b>61 Morin Street</b>		
City <b>Pascoag</b>	State <b>RI</b>	Zip <b>02859-3115</b>	City <b>Woonsocket</b>	State <b>RI</b>	Zip <b>02895</b>
Director Name <b>Marvin C. Ludwig, Jr.</b>			Director Name <b>Sharron Lee Zapor</b>		
Street Address <b>118 Glendale Avenue - Apartment #1</b>			Street Address <b>40 Oak Terrace</b>		
City <b>Woonsocket</b>	State <b>RI</b>	Zip <b>02895</b>	City <b>Mapleville</b>	State <b>RI</b>	Zip <b>02839</b>
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
<b>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.</b>					
<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 <b>Father Philip G. Salois, M.S.</b>				Date <b>7 May 2018</b>	
Signature of Officer/Authorized Representative 					

**FILED**

MAY 11 2018

By 1120 KM