



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 <u>161590</u>		2. Exact name of the Corporation <u>RHODE ISLAND ATTENDANCE OFFICERS ASSOCIATION</u>	
3. State of Incorporation <u>RHODE ISLAND</u>		5. Brief description of the character of business conducted in Rhode Island <u>PROMOTING THE EDUCATIONAL AND VOCATIONAL SERVICES FOR JUVENILES OF THE STATE OF RHODE ISLAND AND TO PROMOTE JUVENILE SCHOOL ATTENDANCE.</u>	
4. NAICS Code <u>813319</u>			
6. Principal Office Address <u>10 BARNACLE DR WEST</u>		City <u>WAKEFIELD</u>	State <u>RI</u>
		Zip <u>02879</u>	
7. List ALL officers (names and addresses). Check the box to indicate an attachment <input type="checkbox"/>			
President Name <u>STEPHEN FACCI</u>		Vice-President Name <u>SHARON PROBST</u>	
Street Address <u>23 WARD AVE</u>		Street Address <u>15 COBBLESTONE TERRACE</u>	
City <u>WESTERLY</u>	State <u>RI</u>	City <u>COVENTRY</u>	State <u>RI</u>
Zip <u>02891</u>		Zip <u>02816</u>	
Secretary Name <u>RICHARD LONGOLUCIO</u>		Treasurer Name <u>KENNETH G BOWMAN</u>	
Street Address <u>151 ALTON BRADFORD RD</u>		Street Address <u>10 BARNACLE DR WEST</u>	
City <u>BRADFORD</u>	State <u>RI</u>	City <u>WAKEFIELD</u>	State <u>RI</u>
Zip <u>02808</u>		Zip <u>02879</u>	
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>			
Director Name <u>STEPHEN FACCI</u>		Director Name <u>SHARON PROBST</u>	
Street Address <u>23 WARD AVE</u>		Street Address <u>15 COBBLESTONE TERRACE</u>	
City <u>WESTERLY</u>	State <u>RI</u>	City <u>COVENTRY</u>	State <u>RI</u>
Zip <u>02891</u>		Zip <u>02816</u>	
Director Name <u>RICHARD LONGOLUCIO</u>		Director Name <u>KENNETH G BOWMAN</u>	
Street Address <u>151 ALTON BRADFORD RD</u>		Street Address <u>10 BARNACLE DR WEST</u>	
City <u>BRADFORD</u>	State <u>RI</u>	City <u>WAKEFIELD</u>	State <u>RI</u>
Zip <u>02808</u>		Zip <u>02879</u>	
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 841.			
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 <u>KENNETH G BOWMAN TRS</u>			Date <u>6/13/18</u>
Signature of Officer/Authorized Representative <u>Kenneth G Bowman TRS</u> SIGN DOCUMENT HERE			

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

FILED

JUN 25 2018

FORM 631 - Revised: 11/2017

BY [Signature]