



**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: 2018

1. Corporate ID No. 000308347

2. Name of Corporation RHODE ISLAND MILITARY FAMILY RELIEF FUND

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

4. Corporate Address in Rhode Island

No. and Street: 645 NEW LONDON AVENUE

City or Town: CRANSTON

State: RI Zip: 02920 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 PROVIDE FINANCIAL ASSISTANCE FOR THE NEEDS OF RESERVE COMPONENT MEMBERS OR FAMILY MEMBERS OF RI RESERVE COMPONENT SOLDIERS, AIRMEN, SEAMEN AND, MARINES DURING PERIODS OF LONGTERM DEPLOYMENT OPERATIONS DUE TO MOBILIZATION

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	CHRISTOPHER CALLAHAN	645 NEW LONDON AVENUE CRANSTON, RI 02920 USA
TREASURER	CHRISTINA L. FAULKNER MS.	645 NEW LONDON CRANSTON, RI 02920 USA
VICE PRESIDENT	CHRISTINA L. FAULKNER MS.	645 NEW LONDON AVE CRANSTON, RI 02920 USA
DIRECTOR	ANTHONY SILVA	STATE HOUSE ROOM 116 PROVIDENCE, RI 02903 USA
DIRECTOR	KEVIN MCDONNELL	541 AIRPORT RD WARWICK, RI 02886 USA
DIRECTOR	SHARON L HARMON	645 NEW LONDON AVE CRANSTON, RI 02920 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**

CHRISTINA L. FAULKNER JOINT FORCE HEADQUARTERS 645 NEW LONDON AVENUE
CRANSTON , RI 02920

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

Signed this 26 Day of June, 2018 at 1:24:47 PM 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 CHRISTINA FAULKNER
Signature of Authorized Person

Form No. 631
Revised 09/07