



**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. 000126172

2. Name of Corporation The RI State Association of Fire Fighters Line of Duty Death Benefit 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

6

813930

4. Corporate Address in Rhode Island

No. and Street: 1865 SMITH STREET

City or Town: NORTH PROVIDENCE

State: RI

Zip: 02911

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 HONOR AND PERPETUATE THE MEMORY OF DECEASED AND INJURED FIRE FIGHTERS AND RESCUE PERSONNEL WHO ARE KILLED IN THE LINE OF DUTY.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	JOSEPH ANDRIOLE	12 NORTH STREET JOHNSTON , RI 02919 USA
TREASURER	HOWARD TIGHE	35 TOP OF THE MARK DRIVE JAMESTOWN, RI 02835 USA
SECRETARY	KEITH CALCI	789 WASHINGTON STREET COVENTRY, RI 02816 USA
VICE PRESIDENT	SCOTT ROBINSON	930 SMITHFIELD AVE APT 913 NORTH PROVIDENCE, RI 02904 USA
DIRECTOR	PAUL VALLETTA	53 CHAMBLY ST. WARWICK, RI 02888 USA
DIRECTOR	ROBERT NEILL	352 PLAIN RD. WEST GREENWICH, RI 02817 USA
DIRECTOR	JAMES RICHARD	303 CHURCH ST. PASCOAG, RI 02859 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**

KEITH A. CALCI 789 WASHINGTON STREET COVENTRY , RI 02816

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

Signed this 22 Day of July, 2018 at 2:18:59 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 KEITH A. CALCI
Signature of Authorized Person

Form No. 631
Revised 09/07

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