



**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. 000792535

2. Name of Corporation North Providence Police Retirees Association

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

813990

4. Corporate Address in Rhode Island

No. and Street: 52 PEEPTOAD ROAD

City or Town: NORTH SCITUATE

State: RI

Zip: 02857

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 IMPROVE THE COMMON WELFARE OF ITS MEMBERS WHICH ARE POLICE OFFICERS RETIRED FROM SERVICE OR DISABILITY IN GOOD STANDING FROM THE NORTH PROVIDENCE POLICE DEPARTMENT OF THE TOWN OF NORTH PROVIDENCE, RHODE ISLAND

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	THOMAS RICHARDSON	52 PEEPTOAD ROAD NORTH SCITUATE, RI 02857 USA
TREASURER	MICHAEL J FIYOD	10 SURREY DRIVE JOHNSTON, RI 02919 US
SECRETARY	DAVID BRADLEY	12 CLEARMEADOW DR. NORTH PROVIDENCE, RI 02911 USA
VICE PRESIDENT	DONALD SOUZA	4 DOMIN AVE. SMITHFIELD, RI 02917 US
DIRECTOR	MICHAEL J. FIYOD	10 SURREY DR. JOHNSTON, RI 02919 USA
DIRECTOR	THOMAS RICHARDSON	52 PEEPTOAD RD. SCITUATE, RI 02857 USA
DIRECTOR	DONALD SOUZA	4 DOMIN AVE. SMITHFIELD, RI 02917 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**

THOMAS RICHARDSON 52 PEEP TOAD ROAD SCITUATE , RI 02857

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

Signed this 5 Day of October, 2018 at 10:32:29 AM 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 MICHAEL J. FIYOD
Signature of Authorized Person

Form No. 631
Revised 09/07