



**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.** 000124073

**2. Name of Corporation** DISABLED POLICE AND SHERIFFS FOUNDATION, INC.

**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

000000

**4. Corporate Address in Rhode Island**

No. and Street: 14304 HENNICK RD

City or Town: STE. GENEVIEVE

State: RI

Zip: 63670

Country: USA

**5. Foreign Corporation. Enter Principal Office Address**

No. and Street: 14304 HENNICK RD

City or Town: STE. GENEVIEVE

State: MO

Zip: 63670

Country:

**6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island**

TO CREATE, DESIGN, ORGANIZE, AND OFFER INSTRUCTIONAL PROGRAMS TO LAW ENFORCEMENT, PROVIDE ASSISTANCE TO DISABLED LAW ENFORCEMENT OFFICERS AND TO THE SURVIVORS OF LAW ENFORCEMENT OFFICERS KILLED IN THE LINE OF DUTY, PROVIDE EDUCATIONAL AND SAFETY ORIENTED RESOURCES TO THE GENERAL PUBLIC AND TO ENGAGE IN ACTIVITIES THAT HEIGHTEN THE IMAGE OF LAW ENFORCEMENT

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	DAVID SCOTT KENIK	14304 HENNICK RD STE. GENEVIEVE, MO 63670 US
TREASURER	DONALD SELSEKY	207 PLAZA DR., STE. C STE. GENEVIEVE, MO 63670 USA
SECRETARY	DONALD SELSEKY	207 PLAZA DR., STE. C STE. GENEVIEVE, MO 63670 USA
OTHER OFFICER	DAVID KENIK	14304 HENNICK RD STE. GENEVIEVE, MO 63670
DIRECTOR	DONALD SELSEKY	207 PLAZA DR., STE. C STE. GENEVIEVE, MO 63670 USA
DIRECTOR	KRISTA KURVERS	207 PLAZA DR. STE. C STE. GENEVIEVE, MO 63670 USA
DIRECTOR	BRIAN STAS	207 PLAZA DR., STE. C STE. GENEVIEVE, MO 63670 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**

CORPORATE CREATIONS NETWORK INC. 10 DORRANCE STREET, SUITE 700 PROVIDENCE , RI  
02903

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

**Signed this 7 Day of November, 2018 at 9:46:54 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 DAVID KENIK  
Signature of Authorized Person

Form No. 631  
Revised 09/07