RI SOS Filing Number: 201883221780 Date: 12/26/2018 11:30:00 AM

	4.6.5.5				•	
Innual Report for the year: Ion-Profit Corporation	1996		_		SEC CO 2018	
→ Filing period: June 1 - June 30					OR RE	
→ Filing Fee: \$20.00						
→ Penalty: Additional \$25.00 fee if f	om is not liled by	y July 30.			RAR AR	
1, Entity ID Number	2. Exact name of the Corporation					
000030479	Tuckertown Fire Department, Inc. 🚊 ్రోక్స్					
3. State of Incorporation	5. Brief description of the character of business conducted in Rhode Island					
RI	Organizing, training and maintaining a volunteer fire department, together with water and ice rescue capabilities in the Tuckertown-Worden Pond area of the town of South Kingstown, RI, as					
4. NAICS Code	-		uckertown-worden Pond ar Joard of Wardens and Chief		_	
624230 - Emergency and Other	may be prese		or wardens and orner.	3 07 (110 0111011 110 013)		
6. Principal Office Address			City	State	Zip	
1116 Ministerial Rd.			Wakefield	RI	02879	
7. List ALL officers (names and addresses)			Mico Descident Name	Check the box to indicate an attachment		
President Name Unknown				Vice-President Name Unknown		
Street Address Unknown			Street Address Unknow	Street Address Unknown		
City	State	Zip	City	State	Žip	
Secretary Name Unknown		•	Treasurer Name Unknow	wn		
Street Address Unknown			Street Address Unknow	Street Address Unknown		
City	State	Zıp	City	State	Zip	
8. List ALL directors (names and ad	idresses). RI Co	rporations MU	ST list at least THREE directo		dicate an attachment [	
Director Name Unknown			Director Name Unknown			
Street Address Unknown			Street Address Unknow	Street Address Unknown		
City	State	Zip	City	State	Zip	
Director Name Unknown			Director Name	Director Name		
Street Address Unknown			Street Address	Street Address		
Cny	State	Zip	City	State	Zip	
9. Registered Agent in Rhode Island	. This information	is currently of re	acord in the Department of State.	Changes require filing Form	641.	
Under penalty of perjury, I declar statements, and that all statemen				any accompanying sche	dules and	
This report must be signed by either the Presi	dent, Vice-President.	Secretary, Assista	ant Secretary, Treasurer, duly Authoriz	ed Representative, Receiver or 1	rustee.	
Name of Officer/Authorized Representative				Date		
Tyler R. Parks				12/20/2018		
Signature of Officer/Authorized Repr	esentative	+++ 1 1	FILED			
1 4/11 1/14	/	- 1   1   1   1   1   1   1   1   1   1	DEC 9.6 2019			

Phone: (401) 222-3040

Website: www.sos.ri.gov

FORM 631 - Revised: 11/2017

## SECRETARIAL CERTIFICATE

I, TYLER PARKS, of 86 Darlene Drive, Wakefield, Rhode Island, do hereby certify that I am the present Secretary of Tuckertown Fire Department, Inc. I certify the officers and directors for this year are unknown and are not available for the purposes of signing this annual report.

Tyler R. Parks