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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: Non-Profit Corporation

2018

SECRETARY OF STATE CORPORATIONS DIV

→ Filing period June 1 - June 30

→ Filing Fee \$20.00

-> Penalty Additional \$25.00 fee if form is not filed by July 30.

2019 FEB 21 PM 2: 13

1. Entity ID Number	2. Exact name o	f the Corporation				
001678396	The Rhode Island Franchisee Association Incorporated					
3 State of Incorporation	5. Brief description of the character of business conducted in Rhode Island					
Rhode Island	COMMUNICATE ISSUES OF SIGNIFICANCE AND EDUCATE FRANCHISEES WITH AN INTEREST IN					
4. NAICS Code	SMALL BUSINESS; ENCOURAGE GROWTH, STABILITY, AND SECURITY FOR BUSINESSES, EMPLOYEES; ENGAGE IN OTHER LAWFUL ACTS UNDER RIGL 7-6.					
813910 - Business Association						
6. Principal Office Address			City	State	Zip	
40 Jordan St) Jordan St			RI	02914	
7. List ALL officers (names and add	iresses)	•	Check the box to indicate an attachment			
President Name Guido Petrosinelli			Vice-President Name Robert Batista			
Street Address 40 Jordan St.			Street Address 40 Jordan St.			
City East Providence	State RI	^{Zip} 02914	City East Providence	State RI	^{7₁p} 02914	
Secretary Name Christopher J. Prazeres			Treasurer Name James Lynch			
Street Address 40 Jordan St.			Street Address 40 Jordan St.			
City East Providence	State RI	Zip 02914	City East Providence	State RI	Zip 02914	
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment						
Director Name Robert Batista			Director Name Christopher J. Prazeres			
Street Address 40 Jordan St.			Street Address 40 Jordan St.			
City East Providence	State RI	^{7ip} 02914	City East Providence	State RI	^{Zip} 02914	
Director Name James Lynch			Director Name John Justo			
Street Address 40 Jordan St.			Street Address 40 Jordan St.			
City East Providence	State RI	Zip 02914	^{City} East Providence	State RI	Zip 02914	
9 Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641						
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.						
This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee						
Name of Officer/Authorized Representative Date						
Guido Petrosinelli 2/21/2109						
Signature of Officer/Authorized Representative						
SION COCEMENT TO THE PROPERTY OF THE PROPERTY						

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov FEB 2 1 2019

FORM 631 - Revised: 11/2017

The Rhode Island Franchisee Association Incorporated

Corporation ID #: 001678396

Supplement to 2018 Annual Report

8. List ALL Directors (names and addresses):

Title	Individual Name	Address		
Director	Robert Batista	40 Jordan St., East Providence, RI 02914		
Director	Christopher J. Prazeres	40 Jordan St., East Providence, RI 02914		
Director	James Lynch	40 Jordan St., East Providence, RI 02914		
Director	John Justo	40 Jordan St., East Providence, RI 02914		
Director	Steven Gabellieri	40 Jordan St., East Providence, RI 02914		
Director	Guido Petrosinelli	40 Jordan St., East Providence, RI 02914		