



FILED

Annual Report for the year: **2018**

MAR 22 2019

Non-Profit Corporation

- Filing period: June 1 - June 30
- Filing Fee: \$20.00
- Penalty: Additional \$25.00 fee if form is not filed by July 30.

BY 1489
[Signature]

1. Entity ID Number 000029452		2. Exact name of the Corporation WARWICK REGULAR FIREMEN'S ASSOCIATION			
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island BANQUET FACILITY AND PRIVATE MEMBERS ONLY CLUB			
4. NAICS Code 813110 - Religious Organization					
6. Principal Office Address 750 WARWICK AVE.			City WARWICK	State RI	Zip 02888
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name JAMES F HEWITT III			Vice-President Name		
Street Address 3524 WEST SHORE ROAD #108			Street Address		
City WARWICK	State RI	Zip 02886	City	State	Zip
Secretary Name GEORGE ASHLEY			Treasurer Name		
Street Address WINSLOW AVE.			Street Address		
City WARWICK	State RI	Zip 02886	City	State	Zip
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input type="checkbox"/>					
Director Name DONNA CONWAY-HEWITT			Director Name MARK BECKLER		
Street Address 3524 WEST SHORE ROAD			Street Address WARWICK AVE.		
City WARWICK	State RI	Zip 02886	City WARWICK	State RI	Zip 02889
Director Name JOHN QUIRK			Director Name		
Street Address AME COURT			Street Address		
City CRANSTON	State RI	Zip 02904	City	State	Zip
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.					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee</i>					
Name of Officer/Authorized Representative JAMES HEWITT III					Date 03/20/2019
Signature of Officer/Authorized Representative <i>[Signature]</i>					