

Filing Number: 2019



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

FILED

Annual Report for the year: 2019
 Non-Profit Corporation

JUN 07 2019

BY Zugz

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

1. Entity ID Number 95203		2. Exact name of the Corporation Rhode Island State FOP Foundation INC.	
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island Raise funds to support the efforts of RI State FOP & it's members	
4. NAICS Code 813930 - Labor Unions and Sim			
6. Principal Office Address 95 Tanner Avenue		City Warwick	State RI
		Zip 02886	
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>			
President Name Robert Quinn		Vice-President Name Corey Huck	
Street Address 95 Tanner Drive		Street Address 95 Tanner Ave	
City Warwick	State RI	City Warwick	State RI
Zip 02886		Zip 02886	
Secretary Name Daniel E. Silva		Treasurer Name Eric Falcofsky	
Street Address 95 Tanner Ave		Street Address 95 Tanner Ave	
City Warwick	State RI	City Warwick	State RI
Zip 02886		Zip 02886	
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 Robert Quinn		Director Name Corey Huck	
Street Address 95 Tanner Drive		Street Address 95 Tanner Ave	
City Warwick	State RI	City Warwick	State RI
Zip 02886		Zip 02886	
Director Name Eric Falcofsky		Director Name	
Street Address 95 Tanner Drive		Street Address	
City Warwick	State RI	City	State
Zip 02886		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.			
<small>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee</small>			
Name of Officer/Authorized Representative Richard Gamache			Date June 22, 2019
Signature of Officer/Authorized Representative 			

MAIL TO:
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