



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

Annual Report for the year: **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.

**FILED STAMP**  
 JUN 12 2019  
 BY 315

1. Entity ID Number <b>29158</b>		2. Exact name of the Corporation Wanskuck Post No. 56 American Legion Home Association			
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island a non-profit patriotic, social, fraternal and/or recreational association			
4. NAICS Code 813319 - Other Social Advoc					
6. Principal Office Address 287 Veazie Street		City Providence	State RI	Zip 02904	
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>David A. Williams</b>		Vice-President Name <b>Joseph P. Richardson</b>			
Street Address <b>15 Manton Court</b>		Street Address <b>1650 Douglas Avenue Apt. 3117</b>			
City <b>Providence</b>	State <b>RI</b>	Zip <b>02909</b>	City <b>North Providence</b>	State <b>RI</b>	Zip <b>02904</b>
Secretary Name <b>Kenneth L. Richardson</b>		Treasurer Name <b>Kenneth L. Richardson</b>			
Street Address <b>201 Woodlawn Avenue Apt. 211</b>		Street Address <b>201 Woodlawn Avenue Apt. 211</b>			
City <b>North Providence</b>	State <b>RI</b>	Zip <b>02904</b>	City <b>North Providence</b>	State <b>RI</b>	Zip <b>02904</b>
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>James F. Righie, Jr.</b>		Director Name <b>Timothy J. Dugan</b>			
Street Address <b>21 Ashley Street</b>		Street Address <b>26 Ferncliff Avenue</b>			
City <b>Cranston</b>	State <b>RI</b>	Zip <b>02920</b>	City <b>North Providence</b>	State <b>RI</b>	Zip <b>02911</b>
Director Name <b>Kenneth L. Richardson</b>		Director Name			
Street Address <b>201 Woodlawn Avenue Apt. 211</b>		Street Address			
City <b>North Providence</b>	State <b>RI</b>	Zip <b>02904</b>	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.					
<i>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>					
<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 <b>Kenneth L. Richardson Treasurer</b>				Date <b>6-6-19</b>	
Signature of Officer/Authorized Representative <i>Kenneth L. Richardson</i>				SIGN DOCUMENT HERE	

MAIL TO:  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
 Phone: (401) 222-3040  
 Website: www.sos.ri.gov