



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**  
 JUN 20 2019  
 BY 1040 DS

|  |                 |  |  |                              |                     |
|--|-----------------|--|--|------------------------------|---------------------|
| 1. Entity ID Number<br><b>000030677</b>  |                 | 2. Exact name of the Corporation<br><b>The United Veterans Council of Woonsocket, Rhode Isl</b>  |  |                              |                     |
| 3. State of Incorporation<br><b>Rhode Island</b>   |                 | 5. Brief description of the character of business conducted in Rhode Island<br><b>To assist local Veterans and their families. To coordinate local Veterans Service Organizations activities for the benefit of our community.</b> |  |                              |                     |
| 4. NAICS Code<br><b>813319 - Other Social Advocac:</b>   |                 |  |  |                              |                     |
| 6. Principal Office Address<br><b>61 Morin Street</b>  |                 |  | City<br><b>Woonsocket</b>                        | State<br><b>RI</b>           | Zip<br><b>02895</b> |
| 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>Marvin C. Ludwig</b>   |                 |  | Vice-President Name <b>Mark A. Camara</b>        |                              |                     |
| Street Address <b>118 Glendale Avenue Apt. 1</b>   |                 |  | Street Address <b>65 11th Avenue</b>             |                              |                     |
| City <b>Woonsocket</b>   | State <b>RI</b> | Zip <b>02895</b>   | City <b>Woonsocket</b>                           | State <b>RI</b>              | Zip <b>02895</b>    |
| Secretary Name <b>Sharron Zapor</b>  |                 |  | Treasurer Name <b>Ernest S. Boisvert</b>         |                              |                     |
| Street Address <b>40 Oak Terrace</b>   |                 |  | Street Address <b>61 Morin Street</b>            |                              |                     |
| City <b>Mapleville</b>   | State <b>RI</b> | Zip <b>02839</b>   | City <b>Woonsocket</b>                           | State <b>RI</b>              | Zip <b>02895</b>    |
| 8. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span> |                 |  |  |                              |                     |
| Director Name <b>Ernest S. Boisvert</b>  |                 |  | Director Name <b>Marvin C. Ludwig</b>            |                              |                     |
| Street Address <b>61 Morin Street</b>  |                 |  | Street Address <b>118 Glendale Avenue Apt. 1</b> |                              |                     |
| City <b>Woonsocket</b>   | State <b>RI</b> | Zip <b>02895</b>   | City <b>Woonsocket</b>                           | State <b>RI</b>              | Zip <b>02895</b>    |
| Director Name <b>Mark A. Camara</b>  |                 |  | Director Name <b>Sharron Zapor</b>               |                              |                     |
| Street Address <b>65 11th Avenue</b>   |                 |  | Street Address <b>40 Oak Terrace</b>             |                              |                     |
| City <b>Woonsocket</b>   | State <b>RI</b> | Zip <b>0895</b>  | City <b>Mapleville</b>                           | State <b>RI</b>              | Zip <b>02839</b>    |
| 9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.  |                 |  |  |                              |                     |
| <b>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.</b>        |                 |  |  |                              |                     |
| <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<br><b>Ernest S. Boisvert / Treasurer</b>   |                 |  |  | Date<br><b>June 17, 2019</b> |                     |
| Signature of Officer/Authorized Representative<br><i>Ernest S. Boisvert / Treasurer</i>  |                 |  |  | SIGN DOCUMENT HERE           |                     |

**MAIL TO:**  
 Division of Business Services  
 148 W. River Street, Providence, Rhode Island 02904-2615  
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