



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

2234

1. Entity ID Number <b>000027768</b>		2. Exact name of the Corporation <b>LEGION HOME, INC</b>			
3. State of Incorporation <b>RHODE ISLAND</b>		5. Brief description of the character of business conducted in Rhode Island <b>VETERANS ADVOCACY AND COMMUNITY AFFAIRS</b>			
4. NAICS Code <b>813990 - Other Similar Organi</b>					
6. Principal Office Address <b>PO BOX 307</b>		City <b>PORTSMOUTH</b>		State <b>RI</b>	Zip <b>02871</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>FRANCIS GUTIERREZ</b>			Vice-President Name <b>STEPHEN DOHERTY</b>		
Street Address <b>303 FOREST AVE</b>			Street Address <b>10 OSAGE DR</b>		
City <b>MIDDLETOWN</b>	State <b>RI</b>	Zip <b>02842</b>	City <b>MIDDLETOWN</b>	State <b>RI</b>	Zip <b>02842</b>
Secretary Name <b>GINAMARIE DOHERTY</b>			Treasurer Name <b>STEPHEN DOHERTY</b>		
Street Address <b>10 OSAGE DR</b>			Street Address <b>10 OSAGE DR</b>		
City <b>MIDDLETOWN</b>	State <b>RI</b>	Zip <b>02842</b>	City <b>MIDDLETOWN</b>	State <b>RI</b>	Zip <b>02842</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>DAVID DUGGAN</b>			Director Name <b>DAN DOUGHERTY</b>		
Street Address <b>84 LINDA AVE</b>			Street Address <b>113 CONSTITUTION ST</b>		
City <b>PORTSMOUTH</b>	State <b>RI</b>	Zip <b>02871</b>	City <b>BRISTOL</b>	State <b>RI</b>	Zip <b>02809</b>
Director Name <b>ANTONIO CERCENA</b>			Director Name		
Street Address <b>66 GIRARD AVE UNIT 418</b>			Street Address		
City <b>NEWPORT</b>	State <b>RI</b>	Zip <b>02840</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.					
<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>					
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 <b>GINAMARIE DOHERTY SECRETARY</b>				Date <b>JUNE 14, 2019</b>	
Signature of Officer/Authorized Representative 					

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