

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: Non-Profit Corporation

FILED

MAY 29 2020

→ 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 001 664 421	2. Exact name of the Corporation	JES, INC		
State of Incorporation A. NAICS Code	5. Brief description of the character Preserving to Former Paut	re momory &	pt, the,	-illed
923148	170111 1000 C	in the l	lietnam	War.
6. Principal Office Address 43 Crystal	Place	Pawticket	State	02861
7. List ALL officers (names and addresses) Check the box to indicate an attachment				
President Name Vau		Vice-President Name Jan	nes Pat	บร
Street Address 1/3 tal D	lace	Street Address Am	old Dr	rive
CityPawtocket	State PI Zin 286)	cumborland	SIPI	382864
Secretary Hame Lincour	+	Treasurer Name Mory	Tattor	<u> </u>
Street Address Wasac	A Kd	Street Address Vest &	shing Ave	2
"Yawticket	210 Zin 226	city Providence	State 2	ZIDGC ALL
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment				
Director Name CRRY	au	Director Name James	s Rath	JS
Street Address Cystal	Place	Street Address 33 A	nobl Dr	ve
City Pawtucket	State Zip Zip Zip Zip	Comberland	27	02864
Director Name Mary D	atton,	Director Name		
Street Address 4 West (Justing XVC	Street Address		
city freviolence	State 2 32984	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.				
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 Value			May	19, 2026
Signature of Officer/Authorized Representative 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