



Department of State - Business Services Division

Annual Report for the year: **2020**
 Non-Profit Corporation

FILED STAMP

JUL 08 2020

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- 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 28294		2. Exact name of the Corporation Massasoit Hook & Ladder Company, No.1, of Warren			
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island A Volunteer Fire Company in the town of Warren, Rhode Island			
4. NAICS Code 624230 - Emergency and Otl					
6. Principal Office Address Government Center, One Joyce Street			City Warren	State R.I.	Zip 02885
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Jorge Avila			Vice-President Name Matthew Dallaire		
Street Address 167 Schoolhouse Road			Street Address 106 Touisset Road		
City Warren	State R.I.	Zip 02885	City Warren	State R.I.	Zip 02885
Secretary Name Raymond J Dutelle			Treasurer Name John J Tattrie		
Street Address 39 Vernon Street			Street Address 65 Schoolhouse Road		
City Warren	State R.I.	Zip 02885	City Warren	State R.I.	Zip 02885
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 Jorge Avila			Director Name Matthew Dallaire		
Street Address 167 Schoolhouse Road			Street Address 106 Touisset Road		
City Warren	State R.I.	Zip 02885	City Warren	State R.I.	Zip 02885
Director Name Tyler Daniels			Director Name		
Street Address 12 Matthew Court			Street Address		
City Warren	State R.I.	Zip 02885	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.					
<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 John J Tattrie / Treasurer				Date 06/28/2020	
Signature of Officer/Authorized Representative <i>John J Tattrie / Treasurer</i>			SIGN DOCUMENT HERE		

MAIL TO:
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 Website: www.sos.ri.gov