



**State of Rhode Island  
Office of the Secretary of State**

Fee: \$20.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Non-Profit Corporation  
Annual Report**

Filing Period: June 1 - June 30

*In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.*

**ANNUAL REPORT YEAR:** 2021

**1. Corporate ID No.** 001660532

**2. Name of Corporation** Patriot Riders of America RI Chapter 1

**3. State of Incorporation**

State: RI

**ARTICLE III**

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code   
813319

**4. Principal Office Address**

No. and Street: C/O ERIK F. HERB  
128 LEMAY ROAD  
City or Town: WOONSOCKET State: RI Zip: 02895 Country: USA

**5. Foreign Corporation. Enter Principal Office Address**

No. and Street:  
City or Town: State: Zip: Country:

**5. Brief Description of the Character of the Affairs Conducted in Rhode Island**

PATRIOT RIDERS OF AMERICA RI CHAPTER 1 IS A NOT FOR PROFIT, NON-PARTISAN ASSOCIATION OF LIKE-MINDED INDIVIDUALS WHO BELIEVE IN THE CONSTITUTION AND THE BILL OF RIGHTS OF THE UNITED STATES OF AMERICA. AS SUCH, OUR SOLE FOCUS IS ON PROVIDING ASSISTANCE TO ACTIVELY SERVING MEMBERS OF THE ARMED FORCES OF THE UNITED STATES OF AMERICA, THE VETERAN, LAW ENFORCEMENT, FIRE FIGHTER AND FIRST RESPONDER, AND THE GENERAL

POPULATION OF OUR LOCAL COMMUNITIES, IN THAT ORDER. ALL MEMBERS DONATE HIS OR HER TIME BECAUSE THEY BELIEVE IN OUR CAUSE.

**6. Names and Addresses of the Officers and Directors:**

**All Directors and Officers must be listed individually. The number of DIRECTORS of a Rhode Island Corporation shall not be less than 3.**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	ERIK F HERB	425 SOUTH MAIN ST. WOONSOCKET, RI 02864 USA
TREASURER	ROBERT N DURAND	5 SUNSET AVE CUMBERLAND, RI 02864 USA
SECRETARY	KELLY VOTOLATO	128 LEMAY RD WOONSOCKET, RI 02864 USA
VICE PRESIDENT	BRIAN F REMILLARD	133 ANGELL RD CUMBERLAND, RI 02864 USA
DIRECTOR	CHRISTOPHER J CARPENTIER	128 LEMAY RD WOONSOCKET, RI 02896 USA

**7. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

ERIK F HERB 128 LEMAY ROAD WOONSOCKET , RI 02895

**8. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.**

**Signed this 5 Day of March, 2021 at 3:58:24 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.***

By ROBERT N DURAND  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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