



**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. 001713154

2. Name of Corporation Rhode Island Federation of Teachers and Health Professionals, Local 8037

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

4. Principal Office Address

No. and Street: 356 SMITH STREET
City or Town: PROVIDENCE State: RI Zip: 02908 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

TO WORK FOR THE WELFARE OF THE SCHOOL CHILDREN, THE ADVANCEMENT OF
EDUCATION
AND THE IMPROVEMENT OF PROFESSIONAL OPPORTUNITIES FOR ALL,
REPRESENTING
SCHOOL TEACHERS AND STAFF, HIGHER EDUCATION, MUNICIPAL AND STATE
EMPLOYEES,
AND HEALTH PROFESSIONALS.

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.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	FRANK J FLYNN	64 PINE ORCHARD ROAD WEST WARWICK, RI 02893 USA
TREASURER	JOHN P. MAGUIRE	37 TEA HOUSE LANE WARWICK, RI 02889 USA
RECORDING SECRETARY	DONNA ROWLAND	181 LAKE STREET SEEKONK, MA 02771 USA
CORRESPONDING SECRETARY	ROXANE D. CARY	3 BETTY STREET LINCOLN, RI 02865 USA
ASSISTANT TREASURER	CHRISTINA DIPRETE	572 SMITHFIELD ROAD, UNIT 7 NORTH PROVIDENCE, RI 02904 USA
VICE PRESIDENT	RONALD BEAUPRE	413 CENTRAL AVENUE PAWTUCKET, RI 02861 USA
VICE PRESIDENT	MARIBETH CALABRO	99 CORLISS STREET PROVIDENCE, RI 02904 USA
VICE PRESIDENT	SEAN DOYLE	PO BOX 462 WEST WARWICK, RI 02893 USA
VICE PRESIDENT	KELLY ERINAKES	18 RISE N SUN DRIVE HOPE, RI 02816 USA
VICE PRESIDENT	KATHLEEN KANDZIERSKI	16 BRENTWOOD DRIVE JOHNSTON, RI 02919 USA
VICE PRESIDENT	LIZBETH LARKIN	855 RESERVOIR AVENUE CRANSTON, RI 02910 USA
DIRECTOR	FRANCIS J. FLYNN	64 PINE ORCHARD ROAD WEST WARWICK, RI 02893 USA
DIRECTOR	JOHN P. MAGUIRE	37 TEA HOUSE LANE WARWICK, RI 02889 USA
DIRECTOR	DONNA ROWLAND	181 LAKE STREET SEEKONK, MA 02771 USA
DIRECTOR	ROXANE D CARY	3 BETTY STREET LINCOLN, RI 02865 USA
DIRECTOR	CHRISTINA DIPRETE	572 SMITHFIELD RD., UNIT 7 NORTH PROVIDENCE, RI 02904 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

FRANCIS J. FLYNN 356 SMITH STREET PROVIDENCE , RI 02908

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

Signed this 9 Day of June, 2021 at 1:56:55 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 FRANCIS J. FLYNN
Signature of Authorized Person

Form No. 631
Revised 09/07

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