



State of Rhode Island
Department of State - Business Services Division

FILED
 JUN 09 2021 *DR*
 682

Annual Report for the year: **2021**

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.

1. Entity ID Number 000790059		2. Exact name of the Corporation Association of Retired Woonsocket Firefighters			
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island Protect and preserve the rights and benefits of the retired Woonsocket Firefighters.			
4. NAICS Code 813920 - Professional Organiz <input type="checkbox"/>					
6. Principal Office Address PO Box 3481		City Woonsocket	State RI	Zip 02895	
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name Rene R. Menard			Vice-President Name Steven Reilly		
Street Address 10 Lincoln Drive			Street Address 1175 Diamond Hill Road #404		
City North Smithfield	State RI	Zip 02896	City Woonsocket	State RI	Zip 02895
Secretary Name Michael A. Richardson			Treasurer Name Thomas F. Williams		
Street Address 417 Elder Ballou Road			Street Address 221 Bernice Ave		
City Woonsocket	State RI	Zip 02895	City Woonsocket	State RI	Zip 02895
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment <input checked="" type="checkbox"/>					
Director Name Shawn Lafferty			Director Name Paul Gosselin		
Street Address 216 Walnut Hill Road			Street Address 8 Oaklawn Road		
City Woonsocket	State RI	Zip 02895	City North Smithfield	State RI	Zip 02896
Director Name Michael H. Crepeau			Director Name John Stefanik		
Street Address 668 Woonsocket Hill Road			Street Address 4 Rennie Drive		
City North Smithfield	State RI	Zip 02896	City Blackstone	State MA	Zip 01504
9. The Registered Agent information of record with the RI Department of State is accurate. 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.					
<small>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</small>					
Name of Officer/Authorized Representative Thomas F. Williams				Date 6/3/2021	
Signature of Officer/Authorized Representative <i>Thomas F Williams</i>					

Non- Profit Corporation Annual Report For The Year 2021

Association of Retired Woonsocket Firefighters

Entity ID No. 000790059

Directors List Continued:

Normand Beauregard

14 Josiah Way

North Attleboro, MA 02703