



**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: February 1 - May 1

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: 2023

1. Corporate ID No. 000132371

2. Name of Corporation VETERANS OF FOREIGN WARS OF THE UNITED STATES

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
813990

4. Principal Office Address

No. and Street: 406 W 34TH STREET
City or Town: KANSAS CITY State: MO Zip: 64111 Country: USA

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

FRATERNAL, PATRIOTIC, HISTORICAL AND EDUCATIONAL; TO PRESERVE AND STRENGTHEN COMRADESHIP AMONG ITS MEMBERS

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	Address
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	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
CEO	DAN WEST	406 W 34TH STREET KANSAS CITY, MO 64111 USA
CFO	MARC GARDUNO	406 W 34TH ST KANSAS CITY, MO 64111 USA
DIRECTOR	TIMOTHY BORLAND	406 WEST 34T STREET KANSAS CITY, MO 64111 USA
DIRECTOR	DUANE SARMIENTO	406 W 34TH STREET KANSAS CITY, MO 64111 USA
DIRECTOR	ALFRED LIPPHARDT JR	406 W 34TH STREET KANSAS CITY, MO 64111 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**

MATTHEW MCCOY 1 CAPITOL HILL 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 12 Day of April, 2023 at 11:37:17 AM 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 MARC GARDUNO
Signature of Authorized Person

Form No. 631
Revised 09/07

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