



**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 - ENTER THE CURRENT FILING YEAR **2023**:** 2023

**1. Corporate ID No.** 000026555

**2. Name of Corporation** EAST PROVIDENCE FIREFIGHTERS BENEFICIAL ASSOCIATION

**3. State of Incorporation**

State: RI

**NAICS CODE**

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

624120

**4. Principal Office Address**

No. and Street: 30 NORTH BROADWAY

City or Town: EAST PROVIDENCE

State: RI

Zip: 02916

Country: US

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

ENACTED THROUGH THE GENERAL ASSEMBLY DURING THE JANUARY SESSION OF 1916 EFFECTIVE 04/14/1916. HEALTH COVERAGE FOR RETIRED FIREFIGHTERS OVER 65

**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	ADAM CHRISTINA	50 BURNSIDE AVENUE RIVERSIDE, RI 02916 USA
DIRECTOR	WILLIAM BAILEY	120 SORES DR PORTSMITH, RI 02871 USA
DIRECTOR	JEFF WYROSTEK	5 HIGHLAND DR WARREN, RI 02885 USA
DIRECTOR	JASON ANDRADE	140 NEWMAN AVE SEEKONK, MA 02771 USA
VICE PRESIDENT	CHARLES CARR	54 KIMBERLY DR WEST GREENWICH, RI 02816 USA
SECRETARY	MCHAEAL CURRAN	99 GEORGE ARDEN AVE WARWICK, RI 02886 USA
TREASURER	JOSEPH DASILVA	32 ANDREWS CT BRISTOL, RI 02809 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**

MICHAEL CURRAN 30 NORTH BROADWAY EAST PROVIDENCE , RI 02916

**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 July, 2023 at 7:51:02 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 MICHAEL CURRAN  
Signature of Authorized Person

Form No. 631  
Revised 09/07