	State of Rhode Office of the Secret		Fee: \$20.00
	Division Of Busines	s Services	
	148 W. River S	Street	
	Providence RI 029		
1636	(401) 222-30	)40	
Foreign Non-Profit			
Annual Report Filing Period: February 1 - May	1		
In accordance with R.I.G.L. 7-6 annual report within the time pr penalty fee of \$25.00.			
ANNUAL REPORT YEAR - EN	TER THE <u>CURRENT</u> FILING	YEAR <b>2023</b> : <u>2023</u>	
1. Corporate ID No. 00102	28373		
2. Name of Corporation <u>Vete</u>	rans Inc.		
3. State of Incorporation			
State: <u>MA</u>			
	NAICS CODE		
Using the dropdown labeled N primary type of activity in whic populate a NAICS Code based box on the right. For further as	ch your entity engages. The d on the chosen selection. If	box to the right of the the NAICS Code is k	e dropdown will
NAICS Code			
<u>624190</u>			
4. Principal Office Address			
No. and Street: 69 GRO	VE STREET		
City or Town: WORCE		<u>AA</u> Zip: <u>01605</u>	Country: <u>USA</u>
5. Brief Description of the Ch	aracter of the Affairs Cond	ucted in Rhode Islan	d
TO PROVIDE HOUSING, TRAINING, EMPLOYMENT, OUTREACH AND SUPPORTIVE			
SERVICES TO VETERANS, SERVICE MEMBERS AND THEIR FAMILIES			
6. Names and Addresses of t	he Officers and Directors:		
All officers and directors must be listed.			
Title	Individual Name First, Middle, Last, Suffix		dress State, Zip Code, Country
1			

PRESIDENT	VINCENT J PERRONE	72 COLUMBUS DRIVE BOYLSTON, MA 01505 USA	
TREASURER	GEORGE M. BOURISK	22 SUNRISE AVENUE GRAFTON, MA 01519 USA	
SECRETARY	ROLAND BERCUME	6 ORLANDO AVENUE WORCESTER, MA 01606 USA	
VICE PRESIDENT	DENIS M LEARY	10 HOLLY LANE SHREWSBURY, MA 01545 USA	
DIRECTOR	EDWARD D BURKART JR	15 ISABEL CIRCLE MONTPELIER, VT 05602 USA	
DIRECTOR	PATRICK MURPHY	42 SURFSIDE ROAD SCITUATE, MA 02066 USA	
DIRECTOR	BARBARA RUGO FOCHT MD	28 GRAFTON COMMON GRAFTON, MA 01519 USA	
DIRECTOR	VICTORIA VITUCCI	83 MARTIN ROAD CONCORD, MA 01742 USA	
DIRECTOR	RALPH D SABATINO PH.D	12 LIBERTY ROAD MEDWAY, MA 02053 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

NORTHWEST REGISTERED AGENT, LLC 47 WOOD AVENUE, SUITE 2 BARRINGTON , RI 02806

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

**Signed this 24 Day of July, 2023 at 7:48:43 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 SOLEDAD JOHNDRO

Signature of Authorized Person

Form No. 631 Revised 09/07

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