	State of Rhode	leland	Fee: \$20.00	
	Office of the Secret		Γ cc. φ20.00	
	Division Of Busines	s Services		
	148 W. River S	treet		
1.05	Providence RI 029			
1630	(401) 222-30	40		
Non-Profit Corporation				
Annual Report Filing Period: February 1 - May	v 1			
In accordance with R I G I 7-6	3-94 each corporation failin	or refusing to	file its	
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 YEAR 2024 : <u>2024</u>				
1. Corporate ID No. 000159350				
2. Name of Corporation Disabled American Veterans Department of Rhode Island				
3. State of Incorporation				
State: <u>RI</u>				
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 <u>click here.</u>				
NAICS Code				
<u>813219</u>				
4. Principal Office Address				
No. and Street: 1 CAPITC	DL HILL, LEVEL G			
City or Town: <u>PROVIDE</u>		tate: <u>RI</u> Zip:	<u>02908</u> Country: <u>USA</u>	
5. Brief Description of the Character of the Affairs Conducted in Rhode Island				
SERVICE DISABLED AMERICAN VETERANS AND THEIR FAMILIES AND ORPHANS				
WITHIN THE STATE OF RHODE ISLAND				
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	

	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country	
PRESIDENT	DONNA COFFIN MS	5 GREENWICH WEST PARK WEST GREENWICH, RI 02817 USA	
TREASURER	MICHAEL L MORIARTY	847 WEST SHORE ROAD WARWICK, RI 02889 USA	
SECRETARY	ERNEST S BOISVERT	61 MORIN STREET WOONSOCKET, RI 02895 USA	
VICE PRESIDENT	EDWARD VIVEIROS	1 TUPPERWARE DR. APT 211 NORTH SMITHFIELD, RI 02896 UMI	
DIRECTOR	EDWARD VIVEIROS	1 TUPERWARE DR APT 211 NORTH SMITHFIELD, RI 02986 UMI	
DIRECTOR	DONNA COFFIN MS	5 GREENWICH WEST PARK WEST GREENWICH, RI 02817 USA	
DIRECTOR	ERNEST S BOISVERT	61 MORIN STREET WOONSOCKET, RI 02895 USA	
DIRECTOR	MICHAEL L MORIARTY	847 WEST SHORE DRIVE WARWICK, RI 02889 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

ERNEST S. BOISVERT 1 CAPITOL HILL, LEVEL G 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 30 Day of January, 2024 at 1:30:50 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 <u>ERNEST BOISVERT</u>

Signature of Authorized Person

Form No. 631 Revised 09/07

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