	State of Rhode		Fee: \$20.00
	Office of the Secreta	ary of State	
	Division Of Busines		
	148 W. River S Providence RI 029		
1636	(401) 222-30		
Non-Profit Corporation Annual Report Filing Period: February 1 - Ma			
	-6-94, each corporation failing prescribed by law (R.I.G.L. 7-6		
ANNUAL REPORT YEAR - E	NTER THE CURRENT YEAR 2	024 : <u>2024</u>	
1. Corporate ID No. 000	026847		
2. Name of Corporation <u>As</u>	sociation of Rhode Island Sta	te Supervisors	
3. State of Incorporation			
State: <u>RI</u>			
	NAICS CODE		
primary type of activity in wh populate a NAICS Code bas	NAICS Code below, select the nich your entity engages. The ed on the chosen selection. If assistance with selecting a cla	box to the right of the the NAICS Code is k	e dropdown will
NAICS Code			
<u>813930</u>			
4. Principal Office Address			
No. and Street: ONE (CAPITOL HILL		
	<u>IDENCE</u> State:	<u>RI</u> Zip: <u>02908</u>	Country: <u>USA</u>
5. Brief Description of the C	character of the Affairs Condu	icted in Rhode Islan	d
UNION REPRESENTATION	ON OF STATE EMPLOYEE	S IN BARGAININ	<u>G UNIT</u>
6. Names and Addresses o	f the Officers and Directors:		
All Directors and Officers r Island Corporation shall no	nust be listed individually. Th t be less than 3.	e number of DIREC	FORS of a Rhode
Title	Individual Name First, Middle, Last, Suffix		Jress State, Zip Code, Country

PRESIDENT	RICHARD COIA	108 ALLERTON AVE. EAST PROVIDENCE, RI 02914 USA	
TREASURER	JOSH O'NEILL	1 TEAKWOOD DRIVE CUMBERLAND , RI 02864 USA	
SECRETARY	MATTHEW LAWLOR	145 OVERLAND AVE CRANSTON, RI 02910 USA	
VICE PRESIDENT	DANNY PACHECO	156 ARMINGTON ST. CRANSTON, RI 02905 USA	
DIRECTOR	DAN STONE	41 JUSTICE ST. NORTH PROVIDENCE, RI 02911 USA	
DIRECTOR	PAUL MURPHY	61 SILO DRIVE CUMBERLAND, RI 02864 USA	
DIRECTOR	PAUL GONSALVES	8 SUTCLIFFE AVE. LINCOLN, RI 02865 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 LAWLOR 145 OVERLAND AVE. CRANSTON , RI 02910

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

Signed this 17 Day of February, 2024 at 10:27:27 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 MATTHEW LAWLOR

Signature of Authorized Person

Form No. 631 Revised 09/07

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