RI SOS Filing Number: 202562389180 Date: 1/13/2025 10:56:00 AM



# 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 YEAR **2025**: <u>2025</u>

- 1. Corporate ID No. <u>001724226</u>
- 2. Name of Corporation East Bay Veterans Coalition
- 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 <u>click here.</u>

NAICS Code

813319

#### 4. Principal Office Address

No. and Street: 432 PARK AVENUE

City or Town: PORTSMOUTH State: RI Zip: 02871 Country: USA

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

THE MISSION OF THE EAST BAY VETERANS SUPPORT COALITION (EBVC) SHALL BE TO

ENHANCE THE WELL-BEING OF EAST BAY'S VETERANS, THEIR FAMILIES, ITS MILITARY

RESIDENTS, AND OUR COMMUNITY BY OUR DEVOTION TO MUTUAL

HELPFULNESS. IN

ADDITION, THE EBVC ADVOCATES FOR UPHOLDING AND DEFENDING THE UNITED STATES

CONSTITUTION, AMERICAN VALUES, EQUAL JUSTICE AND OPPORTUNITY FOR EVERYONE

AND DISCRIMINATION AGAINST NO ONE. THE EBVC WILL FURTHER PROMOTE YOUTH

EDUCATION, RESPONSIBLE CITIZENSHIP AND HONORING MILITARY SERVICE BY OBSERVING AND PARTICIPATING IN MEMORIAL EVENTS.

#### 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 First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
DIRECTOR	PAUL C DULCHINOS SR.	432 PARK AVE. PORTSMOUTH, RI 02871 USA
DIRECTOR	CHARLES R BRULES	20 STANLEY DR. BARRINGTON, RI 02806 USA
DIRECTOR	WILLIAM E GROVES	7 MANOR DR. BARRINGTON, RI 02806 USA
DIRECTOR	ALBERT P GIRARD JR.	41 ADAMS AVE. BARRINGTON, RI 02806 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

PAUL DULCHINOS 432 PARK AVENUE PORTSMOUTH, RI 02871

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

Signed this 13 Day of January, 2025 at 11:00:10 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 <u>PAUL C. DULCHINOS, SR.</u> Signature of Authorized Person

Form No. 631 Revised 09/07