



State of Rhode Island
Department of State - Business Services Division

FILED

Annual Report for the year: 2025

Non-Profit Corporation

→ Filing period: February 1 - May 1

→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

FEB 03 2025
 BY 2060
OK

1. Entity ID Number 000790059		2. Exact name of the Corporation Association of Retired Woonsocket Firefighters	
3. State of Incorporation Rhode Island		5. Brief description of the character of business conducted in Rhode Island Protect and preserve the rights and benefits of the retired Woonsocket Firefighters	
4. NAICS Code 813920			
6. Principal Office Address PO Box 3481		City Woonsocket	State RI
		Zip 02895	
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐			
President Name Rene R. Menard		Vice-President Name Steven Gamache	
Street Address 10 Lincoln Drive		Street Address 236 Old Oxford Road	
City North Smithfield	State RI	City North Smithfield	State RI
Zip 02896		Zip 02896	
Secretary Name Jon Lemoine		Treasurer Name Thomas F. Williams	
Street Address 138 Piedmont Street		Street Address 221 Bernice Avenue	
City Woonsocket	State RI	City Woonsocket RI	State RI
Zip 02895		Zip 02895	
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment ☐			
Director Name Michael A. Richardson		Director Name Paul Gosselin	
Street Address 417 Elder Ballou Road		Street Address 8 Oaklawn Avenue	
City Woonsocket	State RI	City North Smithfield	State RI
Zip 02895		Zip 02896	
Director Name Michael H. Crepeau		Director Name John Stefanik	
Street Address 668 Woonsocket Hill Road		Street Address 8 Rennie Drive	
City North Smithfield	State RI	City Blackstone	State MA
Zip 02896		Zip 01504	
9. The Registered Agent information of record with the RI Department of State is accurate. Changes require filing Form 641.			
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.			
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>			
Name of Officer/Authorized Representative Thomas F. Williams			Date 1/29/2025
Signature of Officer/Authorized Representative <i>Thomas F. Williams</i>			

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

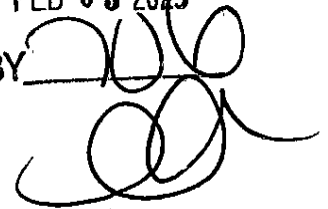
Phone: (401) 222-3040

Website: www.sos.ri.gov

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FEB 03 2025

BY

A handwritten signature in black ink, consisting of several loops and a long horizontal stroke extending to the right.

Non- Profit Corporation Annual Report For The Year 2025

Association of Retired Woonsocket Firefighters

Entity ID No. 000790059

Directors List Continued:

Keith Lopes

216 Summer Street

Woonsocket, RI 02895