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State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2025
Non-Profit Corporation

Filing period: February 1 - May 1

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| IDGS 8 | |
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| → Filing Fee: \$20.00 → Penalty Additional \$25.00 fee if | [:42 | | | | | |
|---|---|-------------------------|--|-----------------------------|---------------------|--|
| 1. Entity ID Number | 2. Exact name of the Corporation | | | | | |
| 001718518 | CIVIL AIR PATROL | | | | | |
| 3 State of Incorporation | 5. Brief description of the character of business conducted in Rhode Island | | | | | |
| DC | SUPPORTING AMERICA'S COMMUNITIES WITH EMERGENCY RESPONSE, DIVERSE | | | | | |
| 4. NAICS Code | AVIATION AND GROUND SERVICES, YOUTH DEVELOPMENT, AND PROMOTION OF AIR, SPACE AND CYBER POWER. | | | | | |
| 813410 | OI AGE AIND G | IBERT OFFER. | | | | |
| 6. Principal Office Address | | | City | State | Zip | |
| 105 S. HANSELL STREET | | MONTGOMERY | AL | 36112 | | |
| 7. List ALL officers (names and addresses) | | | Check the box to indicate an attachment | | | |
| President Name JOHN W. DESMARAIS, SR. COO | | | Vice-President Name | | | |
| Street Address 105 S. HANSELL STREET | | | Street Address 105 S. HANSELL STREET | | | |
| City MAXWELL AFB | State AL | Zip 36112 | City MAXWELL AFB | State AL | Zip 36112 | |
| ecretary Name RAFAEL ROBLES | | | Treasurer Name STACY JACKSON CFO | | | |
| Street Address 105 S. HANSELL STREET | | | Street Address 105 S. HANSELL STREET | | | |
| City MAXWELL AFB | State AL | Zip 36112 | City MAXWELL AFB | State AL | Zip 36112 | |
| 8. List ALL directors (names and a | ddresses). RI Corp | orations MUST lis | | k the how to indicate an | attachment V | |
| Director Name | | | Check the box to indicate an attachment x Director Name | | | |
| Street Address | | | Street Address | | | |
| City | State | Zip | City | State | Zip 36112 | |
| Director Name | | | Director Name | | | |
| Street Address | | | Street Address | | | |
| City | State | Zip | City | State | Zip | |
| 9. The Registered Agent information | on of record with th | e RI Department | of State is accurate. Changes req | uire filing Form 641. | | |
| Under penalty of perjury, I decla statements, and that all stateme | | | | ompanying schedu | les and | |
| This report must be signed by either the Pre | sident. Vice-President, | Secretary, Assistant Se | cretary. Treasurer, duly Authorized Represe | entative, Receiver or Trust | ee | |
| Name of Officer/Authorized Representative | | | Date | ¬ | | |
| COL PHILIP G. HIRONS, Jr., WING COMMANDER FEBRUARY | | | | | | |
| Signature of Officer/Authorized Rep | oresentative | | | | | |
| 11/11 | | | FILED 10:31 | | | |
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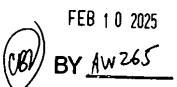
MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.n.gov

RI DOS MADE EDITS PER FILER



CIVIL AIR PATROL BOARD OF DIRECTORS

ID: 001718518

Col. Don Kang 105 S. Hansell Street, Maxwell AFB, AL 36112

Brig. Gen. Daniel C. Clayton 105 S. Hansell Street, Maxwell AFB, AL 36112

Lt. Gen. Kirk Pierce 105 S. Hansell Street, Maxwell AFB, AL 36112

Brig. Gen. Christopher S. Walker 105 S. Hansell Street, Maxwell AFB, AL 36112

Col. John Longley 105 S. Hansell Street, Maxwell AFB, AL 36112

Lt. Col. Andrew J. Oppmann 105 S. Hansell Street, Maxwell AFB, AL 36112

Chief Master Sgt. Robert Dandridge 105 S. Hansell Street, Maxwell AFB, AL 36112

Col. Rajesh Kothari 105 S. Hansell Street, Maxwell AFB, AL 36112

Dr. Sharon DeVivo 105 S. Hansell Street, Maxwell AFB, AL 36112

Amy Kohler Hudnall 105 S. Hansell Street, Maxwell AFB, AL 36112

Brig. Gen. Bernie Skoch 105 S. Hansell Street, Maxwell AFB, AL 36112