

FILED



State of Rhode Island  
Department of State - Business Services Division

Annual Report for the year:  
Non-Profit Corporation

2025

FEB 24 2025

BY

1109 a

→ Filing period: February 1 - May 1

→ Filing Fee: \$20.00

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

|                                                                                                                                                                                                      |             |                                                                                                                                                                    |                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|
| 1. Entity ID Number<br>000028698                                                                                                                                                                     |             | 2. Exact name of the Corporation<br>The Providence Retired Police & Fire Association Inc                                                                           |                          |
| 3. State of Incorporation<br>RI                                                                                                                                                                      |             | 5. Brief description of the character of business conducted in Rhode Island<br>Retirement Benefits for Retired Providence Police And Firefighters And Their Widows |                          |
| 4. NAICS Code<br>P 13920                                                                                                                                                                             |             |                                                                                                                                                                    |                          |
| 6. Principal Office Address<br>92 Prinary St.                                                                                                                                                        |             | City<br>Providence                                                                                                                                                 | State<br>RI Zip<br>02904 |
| 7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>                                                       |             |                                                                                                                                                                    |                          |
| President Name<br>Thomas Johnston                                                                                                                                                                    |             | Vice-President Name<br>Carl Richards                                                                                                                               |                          |
| Street Address<br>92 Prinary St.                                                                                                                                                                     |             | Street Address<br>92 Prinary St                                                                                                                                    |                          |
| City<br>Providence                                                                                                                                                                                   | State<br>RI | City<br>Providence                                                                                                                                                 | State<br>RI Zip<br>02920 |
| Secretary Name<br>Dave Curry                                                                                                                                                                         |             | Treasurer Name<br>Joseph Murphy                                                                                                                                    |                          |
| Street Address<br>92 Prinary St.                                                                                                                                                                     |             | Street Address<br>92 Prinary St.                                                                                                                                   |                          |
| City<br>Providence                                                                                                                                                                                   | State<br>RI | City<br>Providence                                                                                                                                                 | State<br>RI Zip<br>02920 |
| 8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span> |             |                                                                                                                                                                    |                          |
| Director Name<br>Sue Curry                                                                                                                                                                           |             | Director Name<br>Richard De Cicco                                                                                                                                  |                          |
| Street Address<br>92 Prinary St.                                                                                                                                                                     |             | Street Address<br>92 Prinary St.                                                                                                                                   |                          |
| City<br>Providence                                                                                                                                                                                   | State<br>RI | City<br>Providence                                                                                                                                                 | State<br>RI Zip<br>02920 |
| Director Name<br>Robert Jarvis                                                                                                                                                                       |             | Director Name<br>Carl Richards                                                                                                                                     |                          |
| Street Address<br>92 Prinary St.                                                                                                                                                                     |             | Street Address<br>92 Prinary St.                                                                                                                                   |                          |
| City<br>Providence                                                                                                                                                                                   | State<br>RI | City<br>Providence                                                                                                                                                 | State<br>RI Zip<br>02920 |
| 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. |             |                                                                                                                                                                    |                          |
| This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.                                  |             |                                                                                                                                                                    |                          |
| Name of Officer/Authorized Representative<br>Thomas Johnston                                                                                                                                         |             |                                                                                                                                                                    | Date<br>2/20/2025        |
| Signature of Officer/Authorized Representative<br>Thomas Johnston                                                                                                                                    |             |                                                                                                                                                                    |                          |

MAIL TO:  
Division of Business Services  
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FORM 631- Revised: 04/2023