



**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:** 2025

**1. Corporate ID No.** 000099956

**2. Name of Corporation** Providence Fire Department Safety & Survival Foundation, Inc.

**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 [click here](#).

NAICS Code

813990

**4. Principal Office Address**

No. and Street: 92 PRINTERY ST.

3RD FLOOR

City or Town: PROVIDENCE

State: RI

Zip: 02904

Country: USA

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

TO SPONSOR, CO-SPONSOR AND/OR ASSIST WITH ORGANIZING CONFERENCES  
SEMINARS SPEAKING PROGRAMS AND TRAINING THAT WILL PROVIDE AREA  
FIREFIGHTERS.

**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<br>First, Middle, Last, Suffix | Address<br>Address, City or Town, State, Zip Code, Country |
|----------------|------------------------------------------------|------------------------------------------------------------|
| PRESIDENT      | MARK R GIUSTI                                  | 60 WILLIAM ST<br>DARTMOUTH, MA 02748 USA                   |
| TREASURER      | DEREK J GAAB                                   | 177 CENTRAL PIKE<br>SCITUATE, RI 02857 USA                 |
| SECRETARY      | TYLER CONKLIN                                  | 65 MULBERRY DR. - APT 103<br>NORTH KINGSTOWN, RI 02852 USA |
| VICE PRESIDENT | PAT OCONNOR                                    | 70 BYRON AVE<br>EAST PROVIDENCE, RI 02916 USA              |
| DIRECTOR       | JASON LASALLE                                  | 70 WAYNE DR<br>CUMBERLAND, RI 02864 USA                    |
| DIRECTOR       | MARC THIBAULT                                  | 33 ESEK HOPKINS RD.<br>SCITUATE, RI 02857 USA              |
| DIRECTOR       | PAUL CUGINI                                    | 25 DAVIS RD<br>SCITUATE, RI 02857 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**

PAT O'CONNOR 70 BYRON AVE EAST PROVIDENCE , RI 02916

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

**Signed this 5 Day of March, 2025 at 5:45:46 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 DEREK JAMES GAAB  
Signature of Authorized Person

Form No. 631  
Revised 09/07