State of Rhode Island
Office of the Secretary of State

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Fee: $20.00

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. 000031223

2. Name of Corporation Cross's Mills Vol. Fire Dept.

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
624230

4. Principal Office Address

No. and Street: 4258 OLD POST ROAD
City or Town: CHARLESTOWN State: RI Zip: 02813 Country: USA

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

VOLUNTEER FIRE DEPARTMENT

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

PRESIDENT	LAURA KNUDSEN MRS	18 BAXTER ST CHARLESTOWN, RI 02813 USA
TREASURER	BRITTNEY M WILSON	33 HAWKSBILL WAY CHARLESTOWN, RI 02813 USA
SECRETARY	CHELSEA E WILSON	31 HAWKSBILL WAY CHARLESTOWN, RI 02813 USA
VICE PRESIDENT	JOSEPH WEEDEN	PO BOX 159 CHARLESTOWN, RI 02813 USA
DIRECTOR	JOHN BILOTTA	84 ARBUTUS TRAIL CHARLESTOWN, RI 02813 USA
DIRECTOR	JAMES DZWIL MR	107 ARNOLDA ROUND ROAD CHARLESTOWN, RI 02813 USA
DIRECTOR	WILLIAM CLARK	264 NARROW LANE CHARLESTOWN, RI 02813 RI

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

BRITTNEY M. WILSON 4258 OLD POST ROAD CHARLESTOWN , RI 02813

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

Signed this 8 Day of April, 2025 at 2:36:00 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 BRITTNEY M. WILSON
Signature of Authorized Person

Form No. 631
Revised 09/07