



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. 000131762

2. Name of Corporation HEAVY RESCUE INSTITUTE

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

611519

4. Principal Office Address

No. and Street: 100 WESTMINSTER STREET

SUITE 500

City or Town: PROVIDENCE

State: RI Zip: 02903 Country: USA

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

TO ENGAGE IN THE BUSINESS OF PROVIDING FIRE AND RESCUE TRAINING

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	Address
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	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	MICHAEL J. BATES	12 WEBSTER STREET LINCOLN, RI 02865 USA
CEO	DENNIS EDWARD MACEDO	USA MASHPEE, MA 02649
DIRECTOR	RICHARD ALFES	15 LYNNS CORNER ROAD WOODBURY, CT 06798 USA
DIRECTOR	MICHAEL J BATES	12 WEBSTER STREET LINCOLN, RI 02865 USA
DIRECTOR	DENNIS EDWARD MACEDO	4 WOOD HAUL RD MASHPEE, MA 02649 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**

DENNIS E. MACEDO 100 WESTMINSTER ST. SUITE 500 PROVIDENCE , RI 02903

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

Signed this 21 Day of April, 2025 at 1:59:26 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 DENNIS E. MACEDO
Signature of Authorized Person

Form No. 631
Revised 09/07

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