



**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. 000057002

2. Name of Corporation EXETER EMERGENCY DISPATCH CENTER, 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
624230

4. Principal Office Address

No. and Street: 669 TEN ROD ROAD
P.O. BOX 653

City or Town: EXETER State: RI Zip: 02822 Country: USA

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

FIRE AND RESCUE DISPATCHING

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
-------	-----------------	---------

	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
TREASURER	KIMBERLY ST ONGE	13 CAROL LN NARRAGANSETT, RI 02822 USA
PRESIDENT	SCOTT KETTELE	5 JAMES PLACE EXETER, RI 02822- USA
VICE PRESIDENT	ROBERT FRANKLIN	365 NOOSENECK HILL RD. EXETER, RI 02822 USA
DIRECTOR	ROBERT FRANKLIN	365 NOOSENECK HILL RD. EXETER, RI 02822 USA
DIRECTOR	SCOTT KETTELE	5 JAMES PLACE EXETER, RI 02822 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**

SCOTT KETTELE 669 TEN ROD ROAD P.O. BOX 653 EXETER , RI 02822

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

Signed this 4 Day of August, 2025 at 3:31:25 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 SCOTT KETTELE
Signature of Authorized Person

Form No. 631
Revised 09/07

© 2007 - 2025 State of Rhode Island
All Rights Reserved