



**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: 2023

1. Corporate ID No. 000027594

2. Name of Corporation NEWPORT FIREFIGHTERS' PENSION ASSOCIATION

3. State of Incorporation

State: RI

ARTICLE III

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: 21 WEST MARLBOROUGH STREET

City or Town: NEWPORT

State: RI Zip: 02840 Country: USA

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

BENEVOLENT AFFAIRS OF THE MEMBERSHIP AND THE COMMUNITY OF
NEWPORT

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
PRESIDENT	ALLEN GRAY	HONEYMAN AVE MIDDLETOWN, RI 02842 USA
TREASURER	MICHAEL FERREIRA	18 BOUGHTON RD NEWPORT, RI 02840 USA
SECRETARY	EVAN MCDERMOTT	22 CONTINENTAL DR MIDDLETOWN, RI 02842 USA
VICE PRESIDENT	ANDREW PALMER	12 LOYOLA TERR NEWPORT, RI 02840 USA
DIRECTOR	SCOTT WILLIAMS	COUNTY ST NEWPORT, RI 02840 USA
DIRECTOR	CARL ARAUJO	CLAY ST NEWPORT, RI 02840 USA
DIRECTOR	PETER LUTTERBACH	21 WESTMARLBOROUGH WAKFIELD, RI 02879 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**

THOMAS E. SHUGART, JR. DEPARTMENT HEADQUARTERS 21 WEST MARLBOROUGH
STREET NEWPORT , RI 02840

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

Signed this 2 Day of February, 2023 at 12:44:39 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 MICHAEL FERREIRA
Signature of Authorized Person

Form No. 631
Revised 09/07

© 2007 - 2023 State of Rhode Island
All Rights Reserved