

**2022 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F20000005529

**Entity Name:** AAA NORTHEAST, INC.

**Current Principal Place of Business:**

110 ROYAL LITTLE DR  
PROVIDENCE, RI 02904

**Current Mailing Address:**

110 ROYAL LITTLE DR  
PROVIDENCE, RI 02904 US

**FEI Number:** 47-1842331

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS ST  
TALLAHASSEE, FL 32301 US

**FILED**  
**Apr 11, 2022**  
**Secretary of State**  
**1375076658CC**

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DC  
Name BUTLER, FREDERICK K  
Address 110 ROYAL LITTLE DR  
City-State-Zip: PROVIDENCE RI 02904

Title VC  
Name ROGERS, IRVING E III  
Address 110 ROYAL LITTLE DR  
City-State-Zip: PROVIDENCE RI 02904

Title D  
Name BAUGHMAN, MARY A  
Address 110 ROYAL LITTLE DR  
City-State-Zip: PROVIDENCE RI 02904

Title D  
Name O'BOYLE BITETTO, EILEEN  
Address 110 ROYAL LITTLE DR  
City-State-Zip: PROVIDENCE RI 02904

Title D  
Name CAMPION, HEATHER  
Address 110 ROYAL LITTLE DR  
City-State-Zip: PROVIDENCE RI 02904

Title D  
Name COSTELLO, J MICHAEL  
Address 110 ROYAL LITTLE DR  
City-State-Zip: PROVIDENCE RI 02904

Title DIRECTOR  
Name DEBLOIS, ARTHUR J III  
Address 110 ROYAL LITTLE DR  
City-State-Zip: PROVIDENCE RI 02904

Title DIRECTOR  
Name LEIST, ALAN R III  
Address 110 ROYAL LITTLE DR  
City-State-Zip: PROVIDENCE RI 02904

**Continues on page 2**

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JOHN R. GALVIN

**PRESIDENT**

**04/11/2022**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name MEKRUT, WILLIAM A  
Address 110 ROYAL LITTLE DR  
City-State-Zip: PROVIDENCE RI 02904

Title DIRECTOR  
Name PALLY, MITCHELL  
Address 110 ROYAL LITTLE DR  
City-State-Zip: PROVIDENCE RI 02904

Title VP  
Name MANTY, R. STEPHEN  
Address 110 ROYAL LITTLE DR  
City-State-Zip: PROVIDENCE RI 02904

Title SECRETARY  
Name GENOVESE, MARTA  
Address 110 ROYAL LITTLE DR  
City-State-Zip: PROVIDENCE RI 02904

Title DIRECTOR  
Name SHOTMEYER, CHARLES  
Address 110 ROYAL LITTLE DR  
City-State-Zip: PROVIDENCE RI 02904

Title PRESIDENT  
Name GALVIN, JOHN R  
Address 110 ROYAL LITTLE DR  
City-State-Zip: PROVIDENCE RI 02904

Title TREASURER  
Name VIEIRA, KEVIN  
Address 110 ROYAL LITTLE DR  
City-State-Zip: PROVIDENCE RI 02904