

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

A. Ralph Mollis, Secretary of State

Corporations Division 148 W. River Street Providence, RI 02904 2615 401.222,3040

2007

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

Filing Period: June 1 - June 30 • Filing Fee: \$20.00 * THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK

* 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

* The period of the complete of the to a penalty fee of \$25.00.

1. Corporate ID No. 144393	2. Name of Corporation NARRAGANSETT	YOUTH BASKETBALL	ASSOCIATION		
3. State of Incorporation	1 4 ' =	Rbode Island - Street Address	The state of the s	City	Zip
RHODE ISLAND	60 Starr	Drive		Narragansett	02882
5. Foreign corporation. Enter prin	cipal office address		City	State	Zip
6. Brief Description of the character of BASKETBALL ASSOC. FO	of the affairs which are ac R CHILDREN IN NAR	ctually conducted in Rhode Isl RAGANSETT TO PLAY	and THROUGHOUT THE STATE.		
7. NAMES AND ADDRESSES	OF THE OFFICERS	S: ("X" BOX FOR ATTACH	(MENT) [FILL IN SPACES BI	EFORE USING ATTACH	IMENTS
President Name	_ ,		Vice President Name	r	
Kaymond J. I	Doyle	·	Michael Sal	omone	
Street Address 15 Merriweath	er Ave.		15 Crest A	venue	
Narragansett	State R.I	08887	Narragansett	State RI	7ip 02882
Secretary Name Paul Iannucci			Treasurer Name Lynn Notarantonio		
Street Address 42 Horizon	Drive		Stroet Address 51 Narragan	sett Ave.	
Narragansett	State RT	02887	Narragansett	State R-T	02887
8. NAMES AND ADDRESSES	OF THE DIRECTO	RS: ("X" BOX FOR ATTAC	CHMENT) TILL IN SPACES B	EFORE USING ATTACI	
THE NUMBER OF DIRECTO	ORS OF A DOMESTI	IC (RHODE ISLAND)	CORPORATION SHALL NOT B		(3). R.I.G.L.Q-6-23
Director Name		,	Director Name		N) ?
	ovillari		John Stone		5
Street Address 60 Star Dr.		:	Street Address 65 Wildwood	Rd.	SEP
Narragansett	State RI	02882	Narragansett	State RI	02887
Director Name / Steve McKanne	a		Dennis Tiern	 ev	
Street Address 36 Eagle Nest	Ter.		Street Address West Bay	Dr.	37
Narragansett	State RI RHODE ISLAND . D	02882	Naviagausett ges require filing of Form 64	State RI	03883
Agent Name FRANCIS P. CASTROVILLARI		O NOT ALIEN CHAIL	Address	ti - K.I.G.L. /-0-13 / /	-0-/8 :
Address 1195 CRANSTON STREET		***************************************	City CRANSTON	Zip 0292	0-
This report must	be signed by either	the President, Vice Pres	ident, Secretary, Assistant Secr	etary, Treasurer, Receiv	er or Trustee

	144393	
File Date	FILED	
Check No.	OCT 15 2007	
Ву:	By 455	•
	FOR SECRETARY OF STATE USE ONLY	

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