



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2007

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 to a penalty fee of \$25.00.

1. Corporate ID No. 106619		2. Name of Corporation Newport Little League, Inc.	
3. State of Incorporation Rhode Island		4. Corporate address in Rhode Island - Street Address Ellery Avenue	
		City Newport	Zip 02840
5. Foreign corporation. Enter principal office address		City	State Zip
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island operating a sports program of youth			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Terry Horan		Vice President Name Jim Reffelt	
Street Address 6 Peckham Ave		Street Address 66 Malbone Rd	
City Newport	State RI	Zip 02840	City Newport
			State RI
			Zip 02840
Secretary Name Bart Grimes		Treasurer Name Kevin Carlos	
Street Address 139 Kay Street		Street Address 25 Peckham Ave	
City Newport	State RI	Zip 02840	City Newport
			State RI
			Zip 02840
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS			
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23			
Director Name Brian Krauss		Director Name David Andrade	
Street Address 77 Garfield St		Street Address 152 Rhode Island Ave	
City Newport	State RI	Zip 02840	City Newport
			State RI
			Zip 02840
Director Name Scott Woolhouse		Director Name Ted Michaud	
Street Address 7 Homer St		Street Address 577 Spring St	
City Newport	State RI	Zip 02840	City Newport
			State RI
			Zip 02840
9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78			
Agent Name Gregory F. Fater		Address	
Address 55 Memorial Blvd		City Newport	Zip 02840

This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



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FILED	
File Date	DEC 21 2007
Check No.	By 8724
By:	
FOR SECRETARY OF STATE USE ONLY	

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Kevin Carlos 12/19/07
Signature of Officer Date

Kevin Carlos
Print or Type Name of Officer

Treasurer
Title of Officer