

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 2000 401.2. Filing Period: June 1 - June 30 • Filing Fee: \$20.00 \* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK to a benalty fee of \$25.00

to a penalty fee of \$25.	UIZ.				l.G.L. 7-6-91) is sub	
1. Corporate ID No.	2. Name of Co	rporation				
000073432		THE QUONSET AERO CLUB				
3. State of Incorporation		4. Corporate address in Rhode Island - Street Address				
RHODE ISLAND		ET AVENUE		City	Zip	
5. Foreign corporation. E	nter principal office addr	288	City	WEST WARWICK		
			Cuy	State	Zip	
6. Brief Description of the cl	paracter of the affairs whi	ich are actually conducted in	Phode Island	<u> </u>	<u> </u>	
PROVIDING MEMBE	RS CONVENIENT	MEANS OF FLYING A	AT ECONOMICAL RATES			
			ATTACHMENT) TILL IN SPACES			
President Name		TOURSE ( M BOX FOR )	I I I I I I I SPACES	BEFORE USING ATTACH	MENTS	
JAMES BEECH BRENNAN			Vice Presidem Name GARY EICH			
Street Address		<u></u>	<del></del>			
231 CURTIS CORNER ROAD			Street Address 222 SULLIVAN COURT			
City	State	Zip	City			
PEACE DALE	RI	02883	1 "	State	Zip	
Secretary Name		102000	SAUNDERSTOWN	RI	02874	
NEIL ARBOR			Treasurer Name R. DANIEL HARROP			
Street Address			Street Address			
375 CENTERVILLE	ROAD		17 SUNSET AVENUE			
Сиу	State	Zip	City	State	Zip	
VARWICK	RI	02886	WEST WARWICK	1 - 1		
i. NAMES AND ADDR	ESSES OF THE DIR	ECTORS: ("X" BOX FOR	ATTACHMENT) FILL IN SPACES	PERCAPE LICENC APPLICATION		
HE NUMBER OF DI	RECTORS OF A DO.	MESTIC (RHODE ISLA	ND) CORPORATION SHALL NOT	RE IECC THAN THERE	(2) DIST - C.	
			Director Name	DE EESS THAN THREE (	3). K.I.G.L. 7-6-2	
JAMES BEECH BRENNAN			GARY EICH			
Street Address			Street Address			
231 CURTIS CORNER ROAD			222 SULLIVAN COUR	VII		
ity	State	Zip	City	<del> </del>	<u> </u>	
	ĺo	į "				
PEACE DALE	Ri	02883	SALINDERSTOWN		700 三三 11	
irector Name	IKI	02883	SAUNDERSTOWN Director Name		02874	
irector Name		02883	Director Name	RI	02874 3 33 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	
PEACE DALE Director Name VEIL ARBOR Treet Address		02883	Director Name R. DANIEL HARROP	RI		
irector Name IEIL ARBOR reet Address		02883	Director Name R. DANIEL HARROP Street Address	RI	02874	
irector Name IEIL ARBOR reet Address 75 CENTERVILLE		02883	Director Name R. DANIEL HARROP Street Address 17 SUNSET AVENUE	RI	62874 A A A A A A A A A A A A A A A A A A A	
irector Name NEIL ARBOR reet Address 75 CENTERVILLE tty VARWICK	ROAD State RI	Zip 02886	Director Name R. DANIEL HARROP Street Address 17 SUNSET AVENUE City	RI State	602874 E FO	
irector Name IEIL ARBOR reet Address 75 CENTERVILLE try VARWICK	ROAD State RI	Zip 02886	Director Name R. DANIEL HARROP Street Address 17 SUNSET AVENUE City	RI State	62874 A A A A A A A A A A A A A A A A A A A	
irector Name IEIL ARBOR reet Address 75 CENTERVILLE ty VARWICK REGISTERED AGEN rent Name	ROAD  State    RI   T IN RHODE ISLAN	Zip 02886	Director Name R. DANIEL HARROP  Street Address 17 SUNSET AVENUE  City  WEST WARWICK Changes require filing of Form	RI State	62874 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	
trector Name IEIL ARBOR TO Address 75 CENTERVILLE Ty VARWICK REGISTERED AGEN TO THE THE TO TH	ROAD  State    RI   T IN RHODE ISLAN	Zip 02886	Director Name R. DANIEL HARROP  Street Address 17 SUNSET AVENUE  City WEST WARWICK Changes require filling of Form of Address	RI State	62874 A A A A A A A A A A A A A A A A A A A	
irector Name NEIL ARBOR reet Address 175 CENTERVILLE tty VARWICK	ROAD  State    RI   T IN RHODE ISLAN	Zip 02886	Director Name R. DANIEL HARROP  Street Address 17 SUNSET AVENUE  City WEST WARWICK Changes require filing of Form of Address 17 SUNSET AVENUE	State   RI   641 - R.I.G.L. 7-6-13 / 7-66	62874 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	
irector Name IEIL ARBOR reet Address 75 CENTERVILLE ty /ARWICK REGISTERED AGEN ont Name . DANIEL HARROF	ROAD  State    RI   T IN RHODE ISLAN	Zip 02886	Director Name R. DANIEL HARROP  Street Address 17 SUNSET AVENUE  City WEST WARWICK Changes require filling of Form of Address	RI State	62874 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	

	0 0 0 7 3 4 3 2
File Date	FILED
Check No	MAR 1 4 2008
Ву:	By 1/2521
FOR SE	ECRETARY OF SEATE USE ONLY

Under penalty of perjury, I declare and affirm that	I have examined this
report, including any accompanying schedules and st	atements, and that all
statements contained herein are true and correct.	. , ,
K Janis Hand	2/14/08
Signature of Officer	Date
R. DANIEL HARROP	
Print or Type Name of Officer	

**TREASURER** Title of Officer