

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

401.222.3040

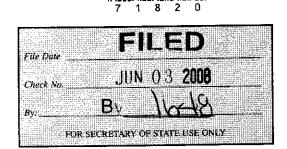
NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

401.222.3

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.	2. Name of Corporation					
71820	GBC ASSOCIATION					
3 State of Incorporation	4. Corporate ad	4. Corporate address in Rhode Island - Street Address			Ζip	
RHODE ISLAND	220 SAND	HILL COVE ROAD		NARRAGANSETT	02882	
5. Foreign corporation. Enter principal office address			City	State	Zip	
6. Brief Description of the chara						
TO OWN AND OPERAT	E A BEACH CL	JB FOR THE PURPOS	E OF PROVIDING SOCIAL AND RE	CREATIONAL ACTIV	ITIES FOR ITS	
MEMBERS	ionamine indicacanami			SARS TRANS MENON		
7. NAMES AND ADDRES	SES OF THE OF	FIGERS: ("X" BOX FOR A	TTAGHMENT) 🗌 FILL IN SPACES BI	PURE USING ATTACH	MUNIS	
President Name			Vice President Name			
RICHARD DALEY						
Street Address			Street Address			
132 PLANTATION DR			- Cin	State	Zip	
City	State	Zip	City :	Sizile	240	
CRANSTON	RI	02882				
Secretary Name			Treasurer Name ADDIE KNIGHT			
BERNADETTE KERR						
Street Address			Street Address 1231 HOPE ROAD			
31 BONNET VIEW DI		72		State	Zip	
City	State	Zip	City	RI	02831	
NARRAGANSETT	RI	02882	HOPE			
8. NAMES AND ADDRES	SES OF THE DU		ATTACHMENT) THIL IN SPACES B	TONE CHICATING		
1-11-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	CTORS OF A DE	MESTIC (RHODE ISLA	ND) CORPORATION SHALL NOT B	E LESS TRANSTIBLE		
Director Name			Director Name			
JAMES BALDWIN			JOSEPH FIORENZANO			
Street Address			Street Address			
39 PENGUIN DRIVE			15 ALBANY STREET	1	7:-	
City	State	Zip	City	State	<i>Ζip</i> 02904	
NARRAGANSETT	RI	02882	NORTH PROVIDENCE	RI	02904	
Director Name			Director Name LISA FIORE			
STEVE PINCH						
Street Address 445 ALLEN AVENUE			Street Address	Street Address 74 KETTLE POND DRIVE		
City	State	Zip	City	State	Zip	
WAKEFIELD]RI	02879	I SOUTH KINGSTOWN	RI	02879	
9. REGISTERED AGENT	IN REGODE ISLA	ND - DO NOT ALTER -	Changes require filing of Form 6	11 - KJ.G.L. 7-0-1577	••• /••	
Agent Name			Address			
MARGARET L. HOGA	AN, ESQUIRE					
Address			City	Zip		
344 MAIN STREET, STE. 200			WAKEFIELD	WAKEFIELD 02879		
		. Malauraka Directional Africa	ee President, Secretary, Assistant Secretary	etary Treasurer Receiv	er or Trustee	
This report n	nust be signed by	eitner the President, Vic	e Freshdein, Secretary, Assistant Secr	ouij, Housdidi, Rocoi		



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. Dernadett

Agnature of Officer Bernadette Kerr

Print or Type Name of Officer

Secretary Title of Officer

Form 631 Rev. 12/06

Date

71820

NAME and ADDRESS OF DIRECTORS -Continuation Page-

Josephine Curzake 8 Riptide Road Narragansett, RI 02882

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JUN 03 2008
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