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*

# NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008

***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 | | |
|---|---|---|---|
| 28119 | Lymansville Athletic Club | | |
| 3. State of Incorporation | 4. Corporate address in Rhode Island - Street Address | City | Zip |
| R.I. | 36 Humbert St. | No. Prov. | 02911 |
| 5. **Foreign corporation.** Enter principal office address | City | State | Zip |
| none | none | none | none |

6. Brief Description of the character of the affairs which are actually conducted in Rhode Island

conducting sporting events for neighborhood youth.

**7. NAMES AND ADDRESSES OF THE OFFICERS: *("X" BOX FOR ATTACHMENT)*** ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

| President Name | Vice President Name |
|---|---|
| Eric J. Russo | Steve Testa |
| Street Address | Street Address |
| 131 Scenery Lane | 2 Testa Dr. |
| City / State / Zip | City / State / Zip |
| Johnston / R.I. / 02919 | No. Prov. / R.I. / 02911 |
| **Secretary Name** | **Treasurer Name** |
| Kathleen Farini | Eric J. Russo |
| Street Address | Street Address |
| 25 Boundary Ave. | 131 Scenery Lane |
| City / State / Zip | City / State / Zip |
| Johnston / R.I. / 02919 | Johnston / R.I. / 02919 |

**8. NAMES AND ADDRESSES OF THE DIRECTORS: *("X" BOX FOR ATTACHMENT)*** ☐ **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 | Director Name |
|---|---|
| Frank Russo | Robert Masi |
| Street Address | Street Address |
| 1725 Smith St. | 40 Oak Grove Blvd |
| City / State / Zip | City / State / Zip |
| No. Prov. / R.I. / 02911 | No. Prov. / R.I. / 02911 |
| **Director Name** | **Director Name** |
| Lou Pelpante | John Fitzgerald |
| Street Address | Street Address |
| 1921 Smith St. | 281 Woonasquatucket Ave |
| City / State / Zip | City / State / Zip |
| No. Prov. / R.I. / 02911 | No. Prov. / R.I. / 02911 |

**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 | Address |
|---|---|
| Steve Testa | 2 Testa Dr. No. Prov. R.I. 02911 |
| **Address** | **City / Zip** |
| 36 Humbert St. | No. Prov. R.I. / 02911 |

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

[redacted] [redacted]

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.

Eric J. Russo — 6/2/08
*Signature of Officer* — *Date*

Eric J. Russo
*Print or Type Name of Officer*

President
*Title of Officer*

**FILED**
*File Date*
JUN 04 2008
*Check No.*
By 1114797329 15
*By:*
FOR SECRETARY OF STATE USE ONLY

[redacted]

Form 631 Rev. 03/07