

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

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

Rhode Island  951 North Main Street  5. Foreign corporation. Enter principal office address  City  State  City  State  City  State  City  City  State  City  City  State  City  City  State  City  Prevident Name  Bernard G. Mondor  Street Address  Pawtucket Red Sox, McCoy Stadium  City  Pawtucket  RI  City  State  City  State  City  Pawtucket  RI  City  State  City  Pawtucket  RI  City  State  City  Pawtucket  RI  City  State  City  State  City  Pawtucket  RI  City  State  City  Pawtucket  Street Address	tition (TS:	Providence	dation, c/o Kahn, Litwin, Rer	d Sox Charitable Four	Pawtucket Re	· · · · •	
3. State of Incorporation Rhode Island 951 North Main Street  City State  City State Street Address  Pawtucket Red Sox, McCoy Stadium  City State Ri State Ri O2860  Pawtucket  Ri Street Address  Pawtucket Screetary Name James F. McAleer  Street Address  Street Address	tition (TS:	Providence	dation, c/o Kahn, Litwin, Rer dress	d Sox Charitable Four	Pawtucket Re	104616	
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8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT)   FILL IN SPACES BEFORE USING ATTACHMENTS	VTS	BEFORE USING ATTA	<i>TTACHMENT)</i> FILL IN SPA	CTORS: ("X" BOX FOR	SSES OF THE DIRE	8. NAMES AND ADDRES	
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.	R.I.G.L. 7-6-2	<u>CBE LESS THAN THRI</u>	D) CORPORATION SHALL	ESTIC (RHODE ISLA)	ECTORS OF A DOM	THE NUMBER OF DIREC	
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Bernard G. Mondor Michael A. Tamburro	<u> </u>	Michael A. Tamburro					
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Pawtucket   RI   02860   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	8	641 - R.I.G.L. 7-6-13	hanges require filing of Fo	UZOUU D. DO NOTATTER - 1	KI CONTRUCION ASSAN	Pawtucket	
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Agent Name			/ Julian Coo			9	
Daniel J. Ryan		716				Daniel J. Ryan	
Address City Zip		Zip	- "			***************************************	
951 North Main Street Providence 02904		=	I Drovidance		∍t	951 North Main Street	
This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Truste		02904	Fibridence		J1	301 140101 MIGHT DUGGE	

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By: FOR SI		

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 bytein fre true and correct.  Wallel / Lya 3/30/6/
Signature of Officer  AA, IEI T. RYAN CPA
Print or Type Name of Officer
Title of Officer To Carp. 1986