

A. Raiph Mollis, Secretary of State

Corporations Division
148 W. River Street

Providence, RI 02904-2615
2008
401 222 3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008 401.222.3

**NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008 401.222.3

**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. 2. Name of Corporation 1. Corporate ID No. 134226 **TEAM CERIO OF WARWICK** Zψ 4. Corporate address in Rhode Island - Street Address 3. State of Incorporation WARWICK 02889 439 SAMUEL GORTON AVENUE RHODE ISLAND State City Foreign corporation. Enter principal office address 6. Brief Description of the character of the affairs which are actually conducted in Rhode Island TO SUPPORT AND DEVELOP AMATEUR ATHLETES FOR NATIONAL AND INTERNATIONAL MARTIAL ARTS COMPETITIONS. 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) [FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name ROBERT TEIXEIRA KRISTEN SHEEHAN Street Address **57 LINCOLN PARK AVENUE 80 NAKONIS DRIVE** Z(q)City City 02920 **RHODE ISLAND** CRANSTON RHODE ISLAND 02888 WARWICK Secretary Name JOANNE FAIOLA JOANNE FAIOLA Street Address Street Address **439 SAMUEL GORTON AVENUE** 439 SAMUEL GORTON AVENUE $Z_{(4)}$ Zitz RHODE ISLAND | 02889 WARWICK RHODE ISLAND 02889 WARWICK B. 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 <u>SHALL NOT BE LESS THAN THREE</u> (3). R.I.G.L. 7-6-23 Director Name **ROBERT TEIXEIRA** KRISTEN SHEEHAN Street Address Street Address **57 LINCOLN PARK AVENUE 80 NAKONIS DRIVE** Zψ Zin State RHODE ISLAND 02920 RHODE ISLAND 02888 CRANSTON WARWICK Director Name JOANNE FAIOLA Street Address Street Address 439 SAMUEL GORTON Zip State Ciev Zin RHODE ISLAND 02889 WARWICK 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 JOANNE FAIOLA Ζiρ City Address WARWICK 02889 439 SAMUEL GORTON AVENUE This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

	1 3 4 2 2 6	Under penalty of perjury, I declare and affirm that I have e report, including any accompanying schedules and statement	xamined this
File Date	6-9-08	statements contained herein are true and correct. Signature of Officer JOANNE FAIOLA	5/5/08
By:	R SECRETARY OF STATE USE ONLY	Print or Type Name of Officer SECRETARY Title of Officer Form 6	531 Rev. 12/06