



State of Rhode Island  
and Providence Plantations  
Office of the Secretary of State

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. 156057		2. Name of Corporation DESTINY ASSOCIATION			
3. State of Incorporation R.I.		4. Corporate address in Rhode Island - Street Address 135 Webster Ave, UNIT 7		City Pawtucket	Zip 02861
5. Foreign corporation. Enter principal office address TO PROMOTE MOTORCYCLE				City	State
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island Education & SAFETY					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Leo Clark			Vice President Name Doug Leedham		
Street Address 4 HOLIDAY DR			Street Address 36 SYCAMORE AVE		
City Lincoln	State R.I.	Zip 02865	City S. ATTLEBORO	State MASS	Zip 02703
Secretary Name Robert Bouvier			Treasurer Name BRAD ALLEN		
Street Address 67 GREENSLITT AVE			Street Address 6 COLLINS AVE		
City Pawtucket	State R.I.	Zip 02861	City Pawtucket	State R.I.	Zip 02860
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 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 Leo Clark			Director Name Doug Leedham		
Street Address 4 HOLIDAY DR			Street Address 36 SYCAMORE AVE		
City Lincoln	State RI	Zip 02865	City Attleboro	State MA	Zip 02703
Director Name Robert Bouvier			Director Name BRAD M. ALLEN		
Street Address 67 GREENSLITT AVE			Street Address 6 COLLINS AVE		
City Pawtucket	State R.I.	Zip 02861	City Pawt.	State R.I.	Zip 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					
Agent Name			Address		
[Redacted]			[Redacted]		
Address			City		
[Redacted]			[Redacted]		

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

**FILE**

JUN 30 2008

File Date	By
	OSZT
Check No.	
By:	
FOR SECRETARY OF STATE USE ONLY	

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.

Signature of Officer: Robert Bouvier Date: 6-5-08  
Print or Type Name of Officer: ROBERT BOUVIER  
Title of Officer: SECRETARY