



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

Fee: \$20.00

Corporations Division  
148 W. River Street  
Providence, Rhode Island 02904-2615  
Telephone: (401) 222-3040

**Foreign Non-Profit  
Annual Report**

Filing Period: June 1 - June 30

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.

**ANNUAL REPORT YEAR:** 2008

**1. Corporate ID No.** 000140834

**2. Name of Corporation** AMATEUR ATHLETIC UNION OF THE UNITED STATES, INC.

**3. State of Incorporation**

State: NY

**4. Corporate Address in Rhode Island**

No. and Street: P.O. BOX 22409

City or Town: LAKE BUENA VISTA State: RI Zip: 32830 Country: USA

**5. Foreign Corporation. Enter Principal Office Address**

No. and Street: 1910 HOTEL PLAZA BLVD

City or Town: LAKE BUENA VISTA State: FL Zip: 34744 Country: USA

**6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island**

TO PROMOTE AMATEUR ATHLETICS AND PHYSICAL EXERCISE

**7. Names and Addresses of the Officers and Directors:**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	ROBERT DODD	3885 SOUTH PERKINS ROAD, SUITE 9 MEMPHIS, TN 38118- USA

**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER**

**Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

INCORP SERVICES, INC. 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI 02888

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

**Signed this 10 Day of July, 2008 at 11:24:59 AM by the incorporator(s).** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By ROBERT DODD

Signature of Officer of the Corporation

President or  Vice President or  Secretary or  Assistant Secretary or

Treasurer or  Receiver or  Trustee (check one)

Form No. 631  
Revised 09/07

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