

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street Providence, RI 02904-2615

401.222.3040

Form 631 Rev. 12/06

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 508 401.222.3

Filing Period: June 1 - June 30 • Filing Fee: \$20.00 * THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK

* In accordance with ALGL. 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 tensity fee of \$25.00 to a penalty fee of \$25.00.

30209 2. Nagrand Corporation (NPORD)	CLUB		
s. State of proporation 4. Consorate address in Rhode Island - Street Address	,	No.K.	24 CQ 85 L
Foreign corporation. Enter principal office address	City	State	Zip
Brief Description of the character of the affairs which are actually conducted in Rhode Is	land		
LITCHORY LOCIDE CLUB N. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACK	HMENT) FILL IN SPACE:	S BEFORE USING ATTA	CHMENTS
resident Name GREAT BONN ITT	Vice President Name	WRIGHEY	
501. Sto OF CAPPI RP.	Street Address CLOP &	New RD	
COVENTO SILVE RI 24028/10	No. Ke	State RF	2ip 02852
iecretary game RK CRANSTON	Treasure Name	D CORP	V
Street Adams AIL RD	Street Address 986	34) BAPI	TST RD.
State RT Zip	Chy). K NO. K ICHMENT) FILL IN SPACE	State RIT	Zip OLF 52 ACHMENTS
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) Director Name	CORPORATION SHALL NO	OT BE LESS THAN THE	REE (3). R.I.G.L. 7-6-23
Joe Peck	Street Address	ChARL	BeRG
Street Stages TOW ON HILL RD	PO BOX	/4)3	775 2 2 6 7
NO. K State R. F 202852	NO. K	State KT	10285 2
Director Nampe Ten MAGNANT	Director Name RANN	KNIBA	17
ireet Addyess TOWAX HILL RD	Street Adjress HUXI	S RIVER	DRIVE
o. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Chan	iges require filing of Form	state F J n 641 - R.I.G.L. 7-6-13	17-6-78
rgent Name DANALO WhALAI	Address		
Address 1 LYDIA RD	NO K.	Zip O o	2852
This report must be signed by either the President, Vice Pre			
	Under penalty of p	erjury, I declare and affirm	n that I have examined this
	report, including an	y accompanying schedules d herein are true and corre	and statements, and that all et.
File Date FILED	Signature of Officer	hand (w	20 6-20
Check No. JUN 3 0 2008	RICH	and de	JONEY
By	Print or Type Name of		
FOR SECRETARY OF STATE USE ONLY	Ti-1C () (C		

Title of Officer