

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 2009

401.2

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 standard for \$6.55.00

penalty fee of \$25.00.							
t Corporate ID No 128243		2. Name of Corporation					
		Cranston Western Little League					
3. State of Incorporation	l '	4. Corporate address in Rhode Island - Street Address City		Cranston	Zip		
RI		2124 Cranston Street			02920		
5 Foreign corporation. En.	ter principal office addre	AS	City:	State	Zip		
		 	<u> </u>				
		sh are actually conducted in R					
Operating all aspects	of a youth baseball	league including practi	ces, games and tournament	S			
7. NAMES AND ADDR	ESSES OF THE OF	FICERS: ("X" BOX FOR A	TTACHMENT) TILL IN SPA	ACES BEFORE USING ATT	ACHMENTS		
President Name		,	Vice President Name				
Michael P. Varrato			Garry Bucci				
Street Address	···		Street Address				
2124 Cranston Stree	et		67 Sage Drive				
City	State	Zip	CHy	State	Zip		
Cranston	RI	02920	Cranston	RI	02921		
Secretary Name			Treasurer Name		•		
Frank Montanaro			Paul Castagliuolo				
Street Address			Street Address				
214 Locust Glen Dri	ve		45 Crest Drive				
City	State	Zip	CHy	State	£2,		
Cranston	RI	02921	Cranston	RI	02 921		
			ATTACHMENT) FILL IN SP				
	RECTORS OF A DO	MESTIC (RHODE ISLA	ND) CORPORATION SHALL	L NOT BE LESS THAN TH	REE (3) R.I.G.L. 7-6-23		
Director Name			Director Name N				
Stephen Mancini		74.	Dave Gargaro		<u></u>		
Street Address			Street Address				
40 Silo Drive		,	29 Scaralia Road		7		
CIŲ:	State	Zip	CHỳ	State	∞ = 5.		
Cranston	RI	02921	Cranston	RI	02921		
Alan Sparling			Director Name		-		
Street Address			Street Address				
14 Collingwood Driv	е						
City	State	Ζip	City:	State	Zip		
Cranston	RI	02921	ŀ				
9. REGISTERED AGEN	T IN RHODE ISLA	ND		·	,		
This information is curre	ently of record in th	e Office of the Secretary of	of State. Changes require filing	of Form 641 - R.I.G.L. 7-6-	13/7-6-78		
This report	must be signed by	either the President, Vic	e President, Secretary, Assist	ant Secretary, Treasurer, R	eceiver or Trustee		

	128243 _{/0:37}	Under penalty of perjury, I declare and affirm that I report, including any accompanying schedules and state	
and the second s	FILED	statements contained herein and true and convect. Signature of Officer	3/22/09 Dail
By:FOR S	MAR 2 6 2009	Michael P. Varrato Print or Type Name of Officer President	
L TOK 3	- July Cognotif V	Title of Officer	Form 631 Rev. 09/17