

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street 2009 rovidence, RI 02904-2615

401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR

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. 27571	2. Name of Corporation KIRKBRAE COUNTRY CLUB				
3. State of Incorporation RI		4. Corporate address in Rhode Island - Street Address 197 Old River Road			^{Zip} 02865-0000
5. Foreign corporation. Enter principal office address			Спу	State	Zip
6. Brief Description of the cha golf club and resta		h are actually conducted in Rh mpany)	ode Island		
7. NAMES AND ADDR	ESSES OF THE OFI	FICERS: ("X" BOX FOR AT	TACHMENT) [FILL IN SPA	ACES BEFORE USING AT	TACHMENTS
President Name David Doucette			Vice President Name Steven E. Deware		
Street Address 5 Logan Drive			Street Address One Tallwood Drive		
City Lincoln	State RI	7/ip 02865 -	City Lincoln	State RI	02865-
Secretary Name Jon R. McCann			Treasurer Name Joseph Sisto		
Street Address 77 Scarborough Road			Street Address 185 Channel View		
Cuy Cumberland	State RI	^{Zip} 02864-	City Warwick	State RI -	^{Zip} 02889-
			ATTACHMENT) TELL IN SP		
Director Name David Doucette			ND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23 Director Name Steven E. Deware		
Street Address 5 Logan Drive			Street Address OneTallwood Drive		
City Lincoln	State RI	Zip 02865-	City Lincoln	State RI	02865-
Director Name Jon R. McCann			Director Name Joseph Sisto		
Street Address 77 Scarborough Road			Street Address 185 Channel View		
City Cumberland	State RI	^{Ziμ} 02864 -	Cit Warwick	state RI	^{Zi} 02889-
9. REGISTERED AGEN	T IN RHODE ISLA	ND '		. I	
This information is curre	ently of record in the	e Office of the Secretary o	f State. Changes require filing	of Form 641 - R.I.G.L. 7-6	5-13/7-6-78
This report	must be signed by	either the President, Vice	President, Secretary, Assist	ant Secretary, Treasurer, F	Receiver or Trustee

MANAGEMENT CONTRACTOR	7
File DateFILED	
Check No. MAY 1 9 2009	
By:	*****
FOR SECRETARY OF STATE USE ONLY	

Under penalty of perjury. I declare an eport including any accompanying so	hedules and statements, and that all
statements contained therein are trubar	6/01/2009
ilignature of Officer David Doucette	Date
Print or Type Name of Officer President	n State Maria
Title of Officer	Form 631 Rev. 09/17

KIRKBRAE COUNTRY CLUB / ID #27571 ADDITIONAL DIRECTORS

Thomas Detorie 36 Massand Road North Attleboro, MA 02760

Robert M. Pielech 700 Pleasant Street, 3rd Floor New Bedford, MA 02740

Angelo S. Rotella 4 Pond View Court Smithfield, RI 02917

Dennis Carvalho 13 Rosewood Drive Lincoln, RI 02865

Charles Corneau 3 Logan Drive Lincoln, RI 02865

E. Joseph Domingo 32 Britt's Ridge Cumberland, RI 02864

Antonio S. Fonseca 30 Higginson Avenue Central Falls, RI 02863

Robert Trahan 25 Cambridge Circle Smithfield, RI 02917

FILED

MAY 1 9 2009

By <u>2757/</u>