



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 2009

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. 32075		2. Name of Corporation PORTSMOUTH PORTUGUESE AMERICAN CITIZENS CLUB	
3. State of Incorporation RI		4. Corporate address in Rhode Island - Street Address 35 POWER ST PO BOX 294	
		City PORTSMOUTH	Zip 02871
5. Foreign corporation. Enter principal office address		City	State
			Zip
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island SOCIAL CLUB FOR FURTHERANCE OF PORTUGUESE CULTURE + HERITAGE			
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name EVERETT CORREIA		Vice President Name GLEN MATHIAS	
Street Address 413 TURNPIKE AVE.		Street Address 390 MIDDLE RD.	
City PORTSMOUTH	State R.I.	City PORTSMOUTH	State R.I.
Zip 02871		Zip 02871	
Secretary Name DAVID SILVA		Treasurer Name LEONARD SILVA	
Street Address 112 MCCARY LANE		Street Address 25 BASIN ST.	
City PORTSMOUTH	State R.I.	City PORTSMOUTH	State R.I.
Zip 02871		Zip 02871	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ 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 Mark Correia		Director Name EDMUNDO N. LIMA	
Street Address 2703 E. Main Rd		Street Address 555-BRISTOL FERRY ROAD	
City PORTSMOUTH	State RI	City PORTSMOUTH	State R. I.
Zip 02871		Zip 02871	
Director Name Joseph R Medeiros		Director Name	
Street Address 632 LINDA AVE.		Street Address	
City PORTSMOUTH	State RI	City	State
Zip 02871		Zip	
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 JOSEPH R. MEDEIROS		Address	
Address 50 POWER ST		City PORTSMOUTH	Zip 02871

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

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 LEONARD SILVA Date May 27, 2009
Print or Type Name of Officer
TREASURER
Title of Officer

File Date	5-27-09
Check No.	1448
By:	MNC
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