



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. 310199		2. Name of Corporation ROBERTO CLEMENTE L. LEAGUE			
3. State of Incorporation PROV		4. Corporate address in Rhode Island - Street Address 181 EARLY ST		City PROV	Zip 02907
5. Foreign corporation. Enter principal office address 181 EARLY ST		City PROV	State R.I.	Zip 02907	
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island make sport activities to children and young					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name ENEMENCIO TORIBIO			Vice President Name Hennady Ant. Arias		
Street Address 181 EARLY ST PO BOX 70861			Street Address 37 Buin St		
City PROV	State R.I.	Zip 02907	City Providence	State RI	Zip 02920
Secretary Name Marcia De Jesus			Treasurer Name Sorlene Polanco		
Street Address 210 Bellevue Av. #2			Street Address 164 Gallatin St		
City Providence	State R.I.	Zip 02907	City PROV	State R.I.	Zip 02907
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 Julian Rodriguez			Director Name Isabel Rizzo		
Street Address 75 Sage St			Street Address 75 Alther St		
City PROV	State RI	Zip 02905	City PROV	State R.I.	Zip 02907
Director Name Isabel Rizzo			Director Name		
Street Address 54 Potters Rd			Street Address		
City PROV	State RI	Zip 02907	City	State	Zip
9. REGISTERED AGENT IN RHODE ISLAND					

This information is currently of record in the Office of the Secretary 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, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or

RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV
2009 JUN 30 PM 3:43

File Date **FILED**
Check No. **JUN 30 2009**
By **0693506**
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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 **Enemencio Toribio** Date
Print or Type Name of Officer **ENEMENCIO TORIBIO**
Title of Officer **President**