

A. Ralph Mollis, Secretary of State Corporations Division

148 W. River Street Providence, RI 02904-2615

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

401.222.3040 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.	2 %			The second of the second			
103763	l "	2. Name of Corporation					
3. State of Incorporation		LINCOLN YOUTH SOCCER ASSOCIATION, INC. 4. Corporate address in Rhode Island - Street Address City 7:10					
RHODE ISLAND	P.O. BOX		Adaress	City	Zip		
			1296	LINCOLN	02865		
5. Foreign corporation. Enter principal office address N/A			City	State	Zip		
	baracter of the affairs whi	ch are actually conducted in R	Phode Island				
THE ORGANIZATION SOCCER LEAGUE	N AND PROMOTIC	N OF YOUTH SOCCE	R TEAMS AND THE ORIGIN				
President Name			Vice President Name				
PETER WINSLOW			DAVID MARTINEAU				
Street Address			Street Address				
18 BRADFORD ST			36 ROCKRIDGE	36 ROCKRIDGE ROAD			
City	State	Zip	City	State	Zip		
LINCOLN	RI	02865	LINCOLN	RI	02865		
Secretary Name KENNETH LABRIE			Treasurer Name ANTHONY NASSANEY				
Street Address 1 PRINCESS PINE ROAD			Street Address 5 GREENWOOD LANE				
City	State	Zip	City	State	Zip		
LINCOLN	RI	02865	LINCOLN	RI	02865		
8. NAMES AND ADDE THE NUMBER OF DI	RESSES OF THE DIF RECTORS OF A DO	RECTORS: ("X" BOX FOR MESTIC (RHODE ISLA	ATTACHMENT) FILL IN SP	PACES BEFORE USING ATT	ACHMENTS		
Director Name			ND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23 Director Name				
PETER WINSLOW			JOHN LAFLEUR				
Street Address			Street Address				
18 BRADFORD STREET			78 CARRIAGE DRIVE				
City	State	Zip	City	State	Zip		
LINCOLN	RI	02865	LINCOLN	Ri	02865		
Director Name ANTHONY NASSANEY			Director Name PETER GANNON				
Street Address			Street Address				
5 GREENWOOD LANE			14 JOYCE ANN DRIVE				
Ciţı	State	Zip	City	State	Zip		
LINCOLN	RI	02865	MANVILLE	RI	02838		
9. REGISTERED AGEN	IT IN RHODE ISLA	ND		•	1 32000		
This information is curr	ently of record in the	Office of the Secretary of	of State. Changes require filing	of Form 641 - R.I.G.L. 7-6-1	3/7-6-78		
This repor	t must be signed by	either the President. Vice	e President, Secretary, Assist	ant Secretary Transumar Da			

File Date	6-30-09
Check No	1796
Ву:	mnc
	FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that report including any accompanying schedules and	at I have examined this
statements contained herein are true and correct.	/ /
Inthory assary	6/20/09
Signature of Office	Date
ANTHONY NASSANEY	
Print or Type Name of Officer	
TREASURER	
Title of Officer	····