

A. Ralph Mollis, Secretary of State Corporations Division

2009 Providence, RI 02904-2615

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 LEGISLY 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 preceived by Jaw (P.I.G. 1. 7-6.91) in the

penalty fee of \$25.00.	corporation failing or refusing to fite	us annual report within the time	prescribed by law (R.I.G.L.,	7-6-91) is subject to a		
1. Corporate ID No. 2. Name of 6	corporation PONANC Fulls	SOFTBALL T	50	······································		
3. State of Incorporation 4. Corporate	address in Rhode Island - Street Addr Box 634	ens	WALWICK	0288 7		
5. Foreign corporation. Enter principal office ad	ldress	City	State	Ζίφ		
6. Brief Description of the character of the affairs to	Ague					
7. NAMES AND ADDRESSES OF THE (OFFICERS: ("X" BOX FOR ATTAC	CHMENT) [FILL IN SPACE	S BEFORE USING ATTAC	HMENTS		
President Name CHARLES MC (A.CHFY		Vice President Name				
Street Address Palace Aut		Street Address GAA	y Staret			
City State At	O 288 6	Praviouset	siare Rt	Zip		
Betey ANDERSON		Treasure TULNE				
Street Address TILLING HAST	Ro	Street Address GAMS	in 1st			
Enst GACCOWIETE State	02818	WALNICK	State	St 03886		
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS						
	DOMESTIC (RHODE ISLAND)		T BE LESS THAN THRE	E (3). R.I.G.L. 7-6-23		
Director Same Why HENNY		Director Name TOFF CAFFACY				
Street Address 550 Smay LAN	ı E	Street Address 3 OSPAR 1	Ct			
WALWICK State	ZIP 07889	LAMWIK K	State	CD85 6		
ED LINNON		Director Name CHEVIAN)			
Street Address GLORGE ALOKO	J Not	Street Address Pake 16	A Not			
State MN WICK 9. REGISTERED AGENT IN RHODE ISI	9 1869.	CMLWICK	State KT	02886		
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 Trustee

FILED

	FEB 16 2010		
	Bylmb	Under penalty of perjury, I declare and affirm t report, including any accompanying schedules at	hat I have examined this
File Date	29-111/28	statements contained herein ato true and correct.	2/10/40
Check No		HANLOS WELANGHE	Date
Ву:	7010 LEB 19 64 S: #1	Print or Type Name of Officer	
FOR SECRETARY OF STATE US	35099044 VIO ENONAHOR	Tule of Officer	
	## RECEIVED ##		Form 631 Rev. 09/17