



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 2010

**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<br>28881                                                                                                                                              |                       | 2. Name of Corporation<br>SILVER LAKE LIONS CLUB, INC.                       |                                         |                       |              |
| 3. State of Incorporation<br>Rhode Island                                                                                                                                |                       | 4. Corporate address in Rhode Island - Street Address<br>234 Pocasset Avenue |                                         | City<br>Providence    | Zip<br>02909 |
| 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<br>HELPS INDIVIDUALS THAT ARE IN NEED, SUCH AS FOOD, EYE GLASSES, ETC. |                       |                                                                              |                                         |                       |              |
| 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS                                        |                       |                                                                              |                                         |                       |              |
| President Name<br>Robert J. Bevilacqua                                                                                                                                   |                       |                                                                              | Vice President Name<br>Angelo Milano    |                       |              |
| Street Address<br>234 Pocasset Avenue                                                                                                                                    |                       |                                                                              | Street Address<br>18 Bel Aire Drive     |                       |              |
| City<br>Providence                                                                                                                                                       | State<br>Rhode Island | Zip<br>02909                                                                 | City<br>Johnston                        | State<br>Rhode Island | Zip<br>02919 |
| Secretary Name<br>Peter L. Cerbo                                                                                                                                         |                       |                                                                              | Treasurer Name<br>Robert J. Bevilacqua  |                       |              |
| Street Address<br>30 Truman Street                                                                                                                                       |                       |                                                                              | Street Address<br>234 Pocasset Avenue   |                       |              |
| City<br>Johnston                                                                                                                                                         | State<br>Rhode Island | Zip<br>02919                                                                 | City<br>Providence                      | State<br>Rhode Island | Zip<br>02909 |
| 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> 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<br>Robert J. Bevilacqua                                                                                                                                    |                       |                                                                              | Director Name<br>Angelo Milano          |                       |              |
| Street Address<br>234 Pocasset Avenue                                                                                                                                    |                       |                                                                              | Street Address<br>18 Bel Aire Drive     |                       |              |
| City<br>Providence                                                                                                                                                       | State<br>Rhode Island | Zip<br>02909                                                                 | City<br>Johnston                        | State<br>Rhode Island | Zip<br>02919 |
| Director Name<br>Peter L. Cerbo                                                                                                                                          |                       |                                                                              | Director Name<br>Corrado Dottor         |                       |              |
| Street Address<br>30 Truman Street                                                                                                                                       |                       |                                                                              | Street Address<br>19 Green Valley Drive |                       |              |
| City<br>Johnston                                                                                                                                                         | State<br>Rhode Island | Zip<br>02919                                                                 | City<br>Johnston                        | State<br>Rhode Island | Zip<br>02919 |
| 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 Trustee

FILED

28881

MAY 11 2010

By *Robert J. Bevilacqua*

29-117954

|                                 |  |
|---------------------------------|--|
| File Date                       |  |
| Check No.                       |  |
| By                              |  |
| FOR SECRETARY OF STATE USE ONLY |  |

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.

*Robert J. Bevilacqua* 5/11/10  
Signature of Officer Date

Robert J. Bevilacqua

Print or Type Name of Officer

President /Treasurer

Title of Officer