



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 120872		2. Name of Corporation NEWPORT LASER FLEET 413, INC.			
3. State of Incorporation RI		4. Corporate address in Rhode Island - Street Address 11 Ellery Road		City Newport	Zip 02840
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 To sponsor, promote, conduct, organize, and assist in promotion, organization, conducting of boat races, principally for the Laser class.					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name STUART STREULI			Vice President Name DAVID REED		
Street Address 11 ELLERY RD.			Street Address 541 MIDDLE RD.		
City NEWPORT	State RI	Zip 02840	City PORTSMOUTH	State RI	Zip 02871
Secretary Name			Treasurer Name DAVID MOFFET		
Street Address			Street Address 28 MOUNT HOPE ST.		
City	State	Zip	City JAMESTOWN	State RI	Zip 02835
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 STEVEN KIRKPATRICK			Director Name WILLIAM DONALDSON		
Street Address 161 FRANK COELHO DR.			Street Address 269 BROWNS LANE		
City PORTSMOUTH	State RI	Zip 02871	City MIDDLETOWN	State RI	Zip 02842
Director Name PHILIP SCHAFER			Director Name JOHN C. BENTLEY		
Street Address 69 KNOWLTON ST.			Street Address 15 ROCK O PUNDEE RD.		
City RIVERSIDE	State RI	Zip 02915	City S. DARTMOUTH	State MA	Zip 02748
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

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

STUART STREULI

Print or Type Name of Officer

PRESIDENT

Title of Officer

Date

7/23/10

File Date

FILED

Check No.

JUL 27 2010

By:

By

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