



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>000057475                                                                                                             |             | 2. Name of Corporation<br>TOX POINT BOYS & GIRLS CLUB ALUMNI ASSOC.      |                                        |                    |              |
| 3. State of Incorporation<br>RHODE ISLAND                                                                                                    |             | 4. Corporate address in Rhode Island - Street Address<br>90 LIVES STREET |                                        | City<br>PROVIDENCE | Zip<br>02906 |
| 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>BOYS & GIRLS CLUB                       |             |                                                                          |                                        |                    |              |
| 7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS            |             |                                                                          |                                        |                    |              |
| President Name<br>ROBERT BRITO                                                                                                               |             |                                                                          | Vice President Name<br>ANTHONY ANDRADE |                    |              |
| Street Address<br>20 BYRON AVENUE                                                                                                            |             |                                                                          | Street Address<br>20 GREENWICH STREET  |                    |              |
| City<br>RUMFORD                                                                                                                              | State<br>RI | Zip<br>02916                                                             | City<br>RUMFORD                        | State<br>RI        | Zip<br>02916 |
| Secretary Name<br>RICHARD KOHLER                                                                                                             |             |                                                                          | Treasurer Name<br>EMMAHUE BARKOWS      |                    |              |
| Street Address<br>27 WOOD HOLLOW AVENUE                                                                                                      |             |                                                                          | Street Address<br>40 DON AVENUE        |                    |              |
| City<br>RUMFORD                                                                                                                              | State<br>RI | Zip<br>02916                                                             | City<br>RUMFORD                        | State<br>RI        | Zip<br>02916 |
| 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>KEITH OLIVEIRA                                                                                                              |             |                                                                          | Director Name<br>JOHN BRITO            |                    |              |
| Street Address<br>63 ROANOKE STREET                                                                                                          |             |                                                                          | Street Address<br>20 SCHOFIELD STREET  |                    |              |
| City<br>PROVIDENCE                                                                                                                           | State<br>RI | Zip<br>02908                                                             | City<br>PROVIDENCE                     | State<br>RI        | Zip<br>02903 |
| Director Name<br>CHARLES SIMON                                                                                                               |             |                                                                          | Director Name                          |                    |              |
| Street Address<br>12 TRAVERSE STREET                                                                                                         |             |                                                                          | Street Address                         |                    |              |
| City<br>PROVIDENCE                                                                                                                           | State<br>RI | Zip<br>02906                                                             | City                                   | State              | Zip          |
| 9. REGISTERED AGENT IN RHODE ISLAND<br>ROBERT BRITO                                                                                          |             |                                                                          |                                        |                    |              |
| 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

10:55

|                                 |                     |
|---------------------------------|---------------------|
| File Date                       | <b>FILED</b>        |
| Check No.                       | <b>SEP 16 2010</b>  |
| By:                             | <b>By 015/26577</b> |
| 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.

Signature of Officer  
ROBERT BRITO  
President  
Title of Officer  
9/16/10  
Date