



State of Rhode Island and Providence Plantations
Office of the Secretary of State

Fee: \$20.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Non-Profit Corporation
Annual Report**

Filing Period: June 1 - June 30

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.

ANNUAL REPORT YEAR: 2011

1. Corporate ID No. 000164426

2. Name of Corporation North Providence Youth Summer Basketball

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 2 SACK STREET

City or Town: NORTH PROVIDENCE State: RI Zip: 02911 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street:

City or Town: State: Zip: Country:

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

TOCONDUCT YOUTH BASKETBALL LEAGUE FOR THE YOUTH OF NORTH PROVIDENCE

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed. If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete

THE NUMBER OF DIRECTORS OF A DOMESTIC(RHODE ISLAND)CORPORATION SHALL NOT BE LESS THAN THREE(3). R.I.G.L. 7-6-23

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	JOHN HAGAN	2 SACK STREET NORTH PROVIDENCE, RI 02911 USA
SECRETARY	JEFFREY DIDOMENICO	27 TREMONT STREET NORTH PROVIDENCE, RI 02904 USA
DIRECTOR	MIKE WALKER	3 JARED DRIVE NORTH PROVIDENCE, RI 02911 USA
DIRECTOR	JEFF ACCIAIOLI	3 PLEASANT VIEW DRIVE NORTH PROVIDENCE, RI 02904 USA
DIRECTOR	DEBRA POLSELLI	59 COLUMBUS AVE NORTH PROVIDENCE, RI 02911 USA

**8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78**

JOHN HAGAN 2 SACK STREET NORTH PROVIDENCE , RI 02911-

9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver, or Trustee.

Signed this 15 Day of September, 2011 at 4:50:08 PM. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.

By JEFFREY DIDOMENICO
Signature of Officer of the Corporation

President or Vice President or Secretary or Assistant Secretary or
 Treasurer or Receiver or Trustee (check one)

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in Section 7.

Form No. 631
Revised 09/07

© 2007 - 2011 State of Rhode Island and Providence Plantations
All Rights Reserved