



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:** 2012

**1. Corporate ID No.** 000513209

**2. Name of Corporation** Smithfield Swimming Booster Club

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: P.O. BOX 94  
City or Town: GREENVILLE State: RI Zip: 02828 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**

TO PROMOTE THE SPORT OF COMPETITIVE SWIMMING AMONG THE YOUTH OF SMITHFIELD, RI.

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	PAMELA GREENE	5 KAREN ANN DRIVE SMITHFIELD, RI 02917 USA
TREASURER	MICHELE DECOSTE	21 COLWELL ROAD GREENVILLE, RI 02828 USA
SECRETARY	KATE LEACH-VIVEIROS	15 WILLIAMS ROAD SMITHFIELD, RI 02917 USA
VICE PRESIDENT	KAREN SCARBOROUGH	64 WILLIAMS ROAD SMITHFIELD, RI 02917 USA
DIRECTOR	PAMELA GREEN	5 KAREN ANN DRIVE SMITHFIELD, RI 02917 USA
DIRECTOR	KAREN SCARBOROUGH	64 WILLIAMS ROAD SMITHFIELD, RI 02917 USA
DIRECTOR	MICHELE DECOSTE	21 COLWELL ROAD GREENVILLE, RI 02828 USA
DIRECTOR	KATE LEACH-VIVEIROS	15 WILLIAMS ROAD GREENVILLE, RI 02917 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**

PAMELA GREENE 5 KAREN ANN DRIVE SMITHFIELD , RI 02917

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

**Signed this 11 Day of June, 2012 at 12:55:15 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 MICHELE L. DECOSTE  
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