



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov/business

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR **2012**

Filing Period: June 1 - June 30 • This report must be typed or printed legibly.

Filing Fee: \$20.00 • FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 121148		2. Exact name of the Corporation Southern Rhode Island Youth Hockey Association			
3. State of Incorporation RI		4. Brief description of the character of business conducted in Rhode Island The operation of a youth hockey program			
5. Principal office address 60 South County Commons Way, G-5			City South Kingstown	State RI	Zip 02879
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Toby Gibbons			Vice-President Name Paul Bertelli		
Street Address 27 Christopher Street			Street Address 68 Millstone Road		
City Wakefield	State RI	Zip 02879	City Wakefield	State RI	Zip 02879
Secretary Name Stephen Neri			Treasurer Name John V. McGreen		
Street Address 45 Secluded Drive			Street Address 811 Boston Neck Road		
City Narragansett	State RI	Zip 02882	City Narragansett	State RI	Zip 02882
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES), RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>					
Director Name Barry Alofsin			Director Name Paul Bertelli		
Street Address 75 Perry Avenue			Street Address 68 Millstone Road		
City Wakefield	State RI	Zip 02879	City Wakefield	State RI	Zip 02879
Director Name Pete Chabot			Director Name Greg Fournier		
Street Address 39 Cydot Drive			Street Address 187 Sir Michael Circle		
City North Kingstown	State RI	Zip 02852	City West Kingston	State RI	Zip 02892
8. REGISTERED AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 641.					

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

File Date _____
 Check No _____
 By _____
FOR SECRETARY OF STATE USE ONLY BY 1960

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JUL 05 2012

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

Date

John V. McGreen

Print or Type Name of Officer

Treasurer

Title of Officer

Southern Rhode Island Youth Hockey Association

Non-Profit Annual Report – 2012

Section 7 – Directors (continued)

Toby Gibbons
27 Christopher Street
Wakefield, RI 02879

JR Krekorian
15 Bayfield Drive
Wakefield, RI 02879

Sharon McGreen
811 Boston Neck Road
Narragansett, RI 02882

Jack McGreen
811 Boston Neck Road
Narragansett, RI 02882

Sean McHugh
3 Exeter Blvd.
Narragansett, RI 02882

Mike Natalizia
50 Edgewater Drive
Narragansett, RI 02882

Stephen Neri
45 Secluded Drive
Narragansett, RI 02882

Jeff Peltier
32 Midnight Court
Saunderstown, RI 02874

Dino Rizzi
264 Fieldstone Lane
Saunderstown, RI 02874

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BY FD 121148 —