



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. 60722		2. Exact name of the Corporation DOWNTOWN SK INC			
3. State of Incorporation RI		4. Brief description of the character of business conducted in Rhode Island ORGANISE EVENTS AND GENERATE FUNDS FOR CHARITIES.			
5. Principal office address PO Box 1940		City E. GREENWICH		State RI	Zip 02818
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name CHARLES BREAGY			Vice-President Name		
Street Address PO Box 1940			Street Address		
City E. GREENWICH	State RI	Zip 02818	City	State	Zip
Secretary Name CHARLES BREAGY			Treasurer Name		
Street Address PO Box 1940			Street Address		
City E. GREENWICH	State RI	Zip 02818	City	State	Zip
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name SIORNON BREAGY			Director Name CHARLES BREAGY		
Street Address PO Box 1940			Street Address PO Box 1940		
City E. GREENWICH	State RI	Zip 02818	City E. GREENWICH	State RI	Zip 02818
Director Name COWOR BREAGY			Director Name		
Street Address PO Box 1940			Street Address		
City E. GREENWICH	State RI	Zip 02818	City	State	Zip
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

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.

FILED 1122

AUG 22 2012

BY 177327

Signature of Officer

CHARLES BREAGY

Print or Type Name of Officer

PRESIDENT

Title of Officer

Date

8/22/12