



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 2013

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. <u>28119</u>		2. Exact name of the Corporation <u>Lyman Athletic Club</u>			
3. State of Incorporation <u>R.I.</u>		4. Brief description of the character of business conducted in Rhode Island <u>Sponsoring local youth athletic events.</u>			
5. Principal office address <u>30 Humbert St.</u>		City <u>NO. PROV.</u>	State <u>R.I.</u>	Zip <u>02911</u>	
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name <u>Eric J. Russo</u>			Vice-President Name <u>Rob Kola</u>		
Street Address <u>131 SCENERY LANE</u>			Street Address <u>1928 SMITH ST.</u>		
City <u>Johnston</u>	State <u>R.I.</u>	Zip <u>02919</u>	City <u>NO. PROV.</u>	State <u>R.I.</u>	Zip <u>02911</u>
Secretary Name <u>KATHLEEN Forlini</u>			Treasurer Name <u>STEVE TESTA</u>		
Street Address <u>25 Boundary AVE</u>			Street Address <u>2 TESTA DR.</u>		
City <u>Johnston</u>	State <u>R.I.</u>	Zip <u>02919</u>	City <u>NO. PROV.</u>	State <u>R.I.</u>	Zip <u>02911</u>
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 <u>Robert Musumeci</u>			Director Name <u>LOU PELPONTE</u>		
Street Address <u>161 SCENERY LANE</u>			Street Address <u>1731 SMITH ST.</u>		
City <u>Johnston</u>	State <u>R.I.</u>	Zip <u>02919</u>	City <u>NO. PROV.</u>	State <u>R.I.</u>	Zip <u>02911</u>
Director Name <u>FRANK Russo</u>			Director Name <u>MIKE MARCIANTE</u>		
Street Address <u>1725 SMITH ST.</u>			Street Address <u>1949 SMITH ST.</u>		
City <u>NO. PROV.</u>	State <u>R.I.</u>	Zip <u>02911</u>	City <u>NO. PROV.</u>	State <u>R.I.</u>	Zip <u>02911</u>
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 _____

FILED

Check No _____

By: _____

JUN 04 2013

FOR SECRETARY OF STATE USE ONLY

BY 10376711639

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.

Eric J. Russo 6/3/13
 Signature of Officer Date

Eric J. Russo
 Print or Type Name of Officer

PRESIDENT
 Title of Officer