



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: 2013

1. Corporate ID No. 000787643

2. Name of Corporation Rick Hole Athletic Foundation

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 4 RACHAEL DRIVE

City or Town: PORTSMOUTH

State: RI

Zip: 02871

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 PROVIDE GRANTS TO AQUIDNECK ISLAND ATHLETIC ORGANIZATIONS AND PUBLIC SCHOOLS FOR PURCHASING EQUIPMENT AND IMPROVING ATHLETIC FACILITIES

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	RICHARD STROUT	4 RACHAEL DRIVE PORTSMOUTH, RI 02871 USA
TREASURER	KATHY HOLE	26 WEATHERLY AVE

		NEWPORT, RI 02840 USA
VICE PRESIDENT	JOHN HOLE	27 WEATHERLY AVE NEWPORT, RI 02840 USA
DIRECTOR	CHRIS GLEASON	WYNDAM HILL RD MIDDLETOWN, RI 02842 USA
DIRECTOR	CHRIS STACK	VANDERBILT RD PORTSMOUTH, RI 02871 USA
DIRECTOR	DAVID HOWE	EAST SHORE RD JAMESTOWN, RI 02835 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**

RICHARD STROUT 4 RACHAEL DRIVE PORTSMOUTH , RI 02871

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

Signed this 13 Day of June, 2013 at 7:29:14 AM. *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 RICHARD M STROUT
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

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