



**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. <b>31125</b>		2. Exact name of the Corporation <b>Rhode Island State Elks Association</b>			
3. State of Incorporation <b>Rhode Island</b>		4. Brief description of the character of business conducted in Rhode Island <b>Charitable and Fraternal</b>			
5. Principal office address <b>PO Box 954 (15 Mason Avenue)</b>		City <b>Portsmouth</b>	State <b>RI</b>	Zip <b>02871-0919</b>	
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name <b>Barry F. Cole</b>		Vice-President Name <b>Eugene Rayno</b>			
Street Address <b>17 Rocket Street</b>		Street Address <b>5 Scotty Drive</b>			
City <b>Westerly</b>	State <b>RI</b>	Zip <b>02891</b>	City <b>Portsmouth</b>	State <b>RI</b>	Zip <b>02871</b>
Secretary Name <b>Lesley Grimes</b>		Treasurer Name <b>Frederick J. Stone</b>			
Street Address <b>43 Johnson Place</b>		Street Address <b>107 Summer Street</b>			
City <b>Wakefield</b>	State <b>RI</b>	Zip <b>02879</b>	City <b>Blackstone</b>	State <b>MA</b>	Zip <b>01504</b>
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 <b>Raymond C. Bruscato</b>		Director Name <b>Leonard Bucci</b>			
Street Address <b>15 Mason Avenue</b>		Street Address <b>116 Prospect Street</b>			
City <b>Portsmouth</b>	State <b>RI</b>	Zip <b>02871</b>	City <b>Middletown</b>	State <b>RI</b>	Zip <b>02879</b>
Director Name <b>Timothy Chilinski</b>		Director Name <b>Walter Kettelle</b>			
Street Address <b>33 Cedard Swamp Road</b>		Street Address <b>594 Lafayette Road</b>			
City <b>Smithfield</b>	State <b>RI</b>	Zip <b>02917</b>	City <b>North Kingston</b>	State <b>RI</b>	Zip <b>02852</b>
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 \_\_\_\_\_

**JUN 14 2013**

By: \_\_\_\_\_

FOR SECRETARY OF STATE USE ONLY

BY *[Signature]*  
 29-199362

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.

*Eugene Rayno* 06/13/2013  
 Signature of Officer Date

**Eugene Rayno**  
 Print or Type Name of Officer

**Vice President East**  
 Title of Officer

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