



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. 91770		2. Exact name of the Corporation Southern Massachusetts Sailing Foundation			
3. State of Incorporation Rhode Island		4. Brief description of the character of business conducted in Rhode Island To provide sailing, competitive excellence in yacht racing, boat safety and seamanship education.			
5. Principal office address c/o 50 Kennedy Plaza, Suite 1500		City Providence		State RI	Zip 02903
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name Pennie S. Hare			Vice-President Name Peter M. Durant		
Street Address P.O. Box 306			Street Address 3 School Street		
City West Falmouth	State MA	Zip 02574	City S. Dartmouth	State MA	Zip 02748
Secretary Name Wesley H. Durant, Jr.			Treasurer Name Wesley H. Durant, Jr.		
Street Address 247 Highland Street			Street Address 247 Highland Street		
City Berlin	State MA	Zip 01503	City Berlin	State MA	Zip 01503
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 Harry B. Duane			Director Name Peter M. Durant		
Street Address 15 Duane Way			Street Address 3 School Street		
City Tisbury	State MA	Zip 02568	City S. Dartmouth	State MA	Zip 02748
Director Name William B. Stearns III			Director Name		
Street Address 732 Federal Furnace Road			Street Address		
City Plymouth	State MA	Zip 02360	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

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JUN 20 2013
BY 02199919

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.

Wesley H. Durant, Jr. 6/10/13
 Signature of Officer _____ Date _____
Wesley H. Durant, Jr.
 Print or Type Name of Officer
Secretary and Treasurer
 Title of Officer