



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>31267</u>		2. Exact name of the Corporation <u>RHODY ROVERS #84 of NORTH American Family Campers Association</u>	
3. State of Incorporation <u>RI</u>		4. Brief description of the character of business conducted in Rhode Island <u>Family Camping</u>	
5. Principal office address <u>11 Temple Street</u>		City <u>Cumberland</u>	State <u>RI</u> Zip <u>02864</u>
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
President Name <u>Raymond Lamoureux Jr</u>		Vice President Name <u>Qita Clarke</u>	
Street Address <u>24 Leveille St</u>		Street Address <u>10 Ash St</u>	
City <u>Coventry</u>	State <u>RI</u> Zip <u>02816</u>	City <u>Wrentham</u>	State <u>MA</u> Zip <u>02093</u>
Secretary Name <u>Ellie McCarthy</u>		Treasurer Name <u>Raymond A Souliere Sr</u>	
Street Address <u>67 Marshall Ave</u>		Street Address <u>11 Temple St</u>	
City <u>Cumberland</u>	State <u>RI</u> Zip <u>02864</u>	City <u>Cumberland</u>	State <u>RI</u> Zip <u>02864</u>
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS <u>MUST</u> LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
Director Name <u>Arthur Valcourt</u>		Director Name <u>Keith Cloutier</u>	
Street Address <u>34 Irving St</u>		Street Address <u>8 Old Hope Rd</u>	
City <u>N Cranston</u>	State <u>RI</u> Zip <u>02904</u>	City <u>Coventry</u>	State <u>RI</u> Zip <u>02816</u>
Director Name <u>Shay Clarke</u>		Director Name <u></u>	
Street Address <u>10 Ash St</u>		Street Address <u></u>	
City <u>Wrentham</u>	State <u>MA</u> Zip <u>02093</u>	City <u></u>	State <u></u> Zip <u></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

10:49 AM

Check No \_\_\_\_\_

NOV 22 2013

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

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FOR SECRETARY OF STATE USE ONLY

By

KM

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.

Raymond A Souliere Sr 11-19-13  
Signature of Officer Date

RAYMOND A SOULIERE SR.  
Print or Type Name of Officer

Treasurer.  
Title of Officer