

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: 2014

1. Corporate ID No. 000523658

2. Name of Corporation Bristol Warren Gridiron Club, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: PO 946

City or Town: BRISTOL State: RI Zip: 02809 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

THE PURPOSE OF THE BRISTOL/WARREN GRIDIRON CLUB SHALL BE TO ENHANCE
THE ATHLETIC, EDUCATIONAL AND PERSONAL GROWTH EXPERIENCE PROVIDED TO
THE MT HOPE HIGH SCHOOL STUDENTS WHO ARE MEMBERS OF THE MT. HOPE HIGH
SCHOOL FOOTBALL PROGRAM AND YOUTH FOOTBALL PROGRAMS IN BRISTOL AND
WARREN, RI

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	ARTHUR ALLEN MANUEL	19 PECKHAM PLACE

		BRISTOL, RI 02809 USA
DIRECTOR	JAY PROULX	P.O. BOX 946 BRISTOL, RI 02809 USA
DIRECTOR	MARK RHYNARD	PO BOX 946 BRISTOL, RI 02809 USA
DIRECTOR	TED J. MOSKALA	21 TILBURY DRIVE BRISTOL, RI 02809 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

ARTHUR A. MANUEL 19 PECKHAM PLACE BRISTOL, RI 02809

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

Signed this 5 Day of May, 2014 at 11:41:41 AM by the authorized person. 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 company, 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 <u>ARTHUR A. MANUEL</u> Signature of Authorized Person

Form No. 631 Revised 09/07

© 2007 - 2014 State of Rhode Island and Providence Plantations All Rights Reserved