



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 2014

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 America Family Camp Assoc.</u>	
3. State of Incorporation <u>RI</u>		4. Brief description of the character of business conducted in Rhode Island <u>Family Camping group</u>	
5. Principal office address <u>11 Temple St.</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>Richard Ramonew Jr</u>		Vice-President Name <u>Orta Clarke</u>	
Street Address <u>24 Reville St</u>		Street Address <u>10 Ash St</u>	
City <u>Coventry</u>	State <u>RI</u>	Zip <u>02816</u>	City <u>Wentham</u> State <u>MA</u> Zip <u>02093</u>
Secretary Name <u>Raymond Soulierie</u>		Treasurer Name <u>Raymond Soulierie Sr</u>	
Street Address <u>11 Temple St</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 MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
Director Name <u>Keith Cloutier</u>		Director Name <u>Shay Clarke</u>	
Street Address <u>8 Old Hope Rd</u>		Street Address <u>10 Ash St</u>	
City <u>Coventry</u>	State <u>RI</u>	Zip <u>02816</u>	City <u>Wentham</u> State <u>MA</u> Zip <u>02093</u>
Director Name <u>Tex Watson</u>		Director Name	
Street Address <u>81 Anthony St</u>		Street Address	
City <u>Secaucus</u>	State <u>MA</u>	Zip <u>02771</u>	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

File Date _____

FILED

Check No _____

MAY 19 2014

By: _____

1335

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 Soulierie, Jr. 5/16/2014
 Signature of Officer Date

RAYMOND A SOULIERE, SR.
 Print or Type Name of Officer

Treasurer
 Title of Officer