



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

## 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. <b>27475</b>		2. Exact name of the Corporation <b>NEW ENGLAND SOCCER HALL OF FAME</b>	
3. State of Incorporation <b>RI</b>		4. Brief description of the character of business conducted in Rhode Island <b>TO HONOR INDIVIDUALS WHO PROMOTE SOCCER</b>	
5. Principal office address <b>92 GAND STREET</b>		City <b>PROVIDENCE</b>	State <b>RI</b> Zip <b>02906</b>
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
President Name <b>BRIAN O'CONNELL</b>		Vice-President Name <b>LEN MEACURIO</b>	
Street Address <b>614 MAPLE AVENUE</b>		Street Address <b>6 NEEDHAM STREET</b>	
City <b>SWANSEA</b>	State <b>MA</b>	City <b>JOHNSTON</b>	State <b>RI</b> Zip <b>02919</b>
Secretary Name <b>JOSEPH J. SOUSA</b>		Treasurer Name <b>LILLIAN N. SOUSA</b>	
Street Address <b>148 FORT STREET</b>		Street Address <b>234 MERCER STREET</b>	
City <b>EAST PROVIDENCE</b>	State <b>RI</b>	City <b>EAST PROVIDENCE</b>	State <b>RI</b> Zip <b>02914</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>JOSEPH B. SOUSA</b>		Director Name <b>MANUEL LEMOS</b>	
Street Address <b>234 MERCER STREET</b>		Street Address <b>66 HILLTOP ROAD</b>	
City <b>EAST PROVIDENCE</b>	State <b>RI</b>	City <b>EAST PROVIDENCE</b>	State <b>RI</b> Zip <b>02914</b>
Director Name <b>ERNESTO TEIXEIRA</b>		Director Name <b>JOHN SCOTT</b>	
Street Address <b>74 MILL STREET</b>		Street Address <b>2970 MENDON ROAD #26</b>	
City <b>CUMBERLAND</b>	State <b>RI</b>	City <b>CUMBERLAND</b>	State <b>RI</b> Zip <b>02864</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, duly Authorized Representative, Receiver or Trustee

**FILED**

File Date \_\_\_\_\_

**JUN 02 2014**

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

By: \_\_\_\_\_ By **225371**

FOR SECRETARY OF STATE USE ONLY

*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.

*Lillian N. Sousa* **6-2-14**  
Signature of Officer or Authorized Representative Date

**Lillian N. Sousa**  
Print or Type Name of Officer or Authorized Representative