



**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>799532</b>		2. Exact name of the Corporation <b>IRISH COASTAL CLUB</b>			
3. State of Incorporation <b>RHODE ISLAND</b>		4. Brief description of the character of business conducted in Rhode Island <b>THE PURPOSE OF THE IRISH COASTAL CLUB IS TO PROMOTE, FOSTER, DISSEMINATE AND PROMULGATE KNOWLEDGE, INFORMATION AND UNDERSTANDING OF IRISH CULTURE.</b>			
5. Principal office address <b>4 ELM STREET P.O. BOX 1881</b>		City <b>WESTERLY</b>		State <b>RI</b>	Zip <b>02891</b>
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name <b>JANEANN QUAEDVLIEG</b>		Vice-President Name <b>EILEEN MOSTELLER</b>			
Street Address <b>3 SEAGULL ROAD</b>		Street Address <b>7 DIXON STREET</b>			
City <b>WESTERLY</b>	State <b>RI</b>	Zip <b>02891</b>	City <b>WESTERLY</b>	State <b>RI</b>	Zip <b>02891</b>
Secretary Name <b>MICHELLE MADDEN</b>		Treasurer Name <b>CHRIS LAWLOR</b>			
Street Address <b>69 MARY HALL ROAD</b>		Street Address <b>8 BUCKS TRAIL</b>			
City <b>PAWCATUCK</b>	State <b>CT</b>	Zip <b>06379</b>	City <b>WESTERLY</b>	State <b>RI</b>	Zip <b>02891</b>
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS <b>MUST</b> LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name <b>JANEANN QUAEDVLIEG</b>		Director Name <b>EILEEN MOSTELLER</b>			
Street Address <b>3 SEAGULL ROAD</b>		Street Address <b>7 DIXON STREET</b>			
City <b>WESTERLY</b>	State <b>RI</b>	Zip <b>02891</b>	City <b>WESTERLY</b>	State <b>RI</b>	Zip <b>02891</b>
Director Name <b>MICHELLE MADDEN</b>		Director Name <b>CHRIS LAWLOR</b>			
Street Address <b>69 MARY HALL ROAD</b>		Street Address <b>8 BUCKS TRAIL</b>			
City <b>PAWCATUCK</b>	State <b>CT</b>	Zip <b>06379</b>	City <b>WESTERLY</b>	State <b>RI</b>	Zip <b>02891</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

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

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

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

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BY

**FILED**

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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.

Signature of Officer or Authorized Representative

Date

**JANEANN QUAEDVLIEG**

Print or Type Name of Officer or Authorized Representative