



**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.** 000131709

**2. Name of Corporation** Corvette Cruisers

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: C/O PAUL HARRINGTON  
54 COLE DRIVE

City or Town: NORTH KINGSTOWN

State: RI Zip: 02852 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**

TO OPERATE A 50/50 RAFFLE AS PART OF CLASSIC CAR CRUISE NIGHTS PROCEEDS  
DISTRIBUTED TO VARIOUS CHARITIES

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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 First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
TREASURER	PAUL HARRINGTON	54 COLE DRIVE NORTH KINGSTOWN, RI 02852 USA
SECRETARY	MARK ANDRADE	19 OVERHILL RD

		WARREN, RI 02885 USA
PRESIDENT	PAUL HARRINGTON	54 COLE DRIVE NORTH KINGSTOWN, RI 02852- USA
VICE PRESIDENT	PETER SACCHETTI	165 GRANDVIEW DR WARWICK, RI 02886 USA
DIRECTOR	PETER SACCHETTI	165 GRANDVIEW DRIVE WARWICK, RI 02886 USA
DIRECTOR	PAUL HARRINGTON	54 COLE DRIVE NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	MARK ANDRADE	19 OVERHILL RD WARREN, RI 02885 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**

PAUL T. HARRINGTON 54 COLE DRIVE NORTH KINGSTOWN , RI 02852-

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

**Signed this 29 Day of June, 2014 at 12:44:55 PM 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 PAUL T HARRINGTON  
Signature of Authorized Person

Form No. 631  
Revised 09/07