



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. 000506295

2. Name of Corporation Ocean State Curling Club, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 825 PONTIAC AVE
APT 6-103

City or Town: CRANSTON State: RI Zip: 02910 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 TEACH DEVELOPM PROMOTE AND ENCOURAGE THE SPORT OF CURLING

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	LARRY RICCITELLI	11 AMBASSADOR AVE WARWICK , RI 02889 USA
TREASURER	CORY J POWERS	825 PONTIAC AVE. APT 6-103 CRANSTON , RI 02910 USA

SECRETARY	JONATHAN LANGILLE	15 CLARK PLACE QUAKER HILL , CT 06375 USA
DIRECTOR	GORDON WALSH	106 HIMES ST NORTH KINGSTON , RI 02852 USA
DIRECTOR	DAVE KOLIBABA	232 GREENWOOD ST CRANSTON , RI 02910 USA
DIRECTOR	MALCOLM STARR	631 ANGELL ST PROVIDENCE, RI 02906 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

SCOTT J. PINARCHICK, ESQ. EDWARDS WILDMAN PALMER LLP 2800 FINANCIAL PLAZA
PROVIDENCE , RI 02903

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

Signed this 30 Day of June, 2014 at 12:00:56 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 CORY POWERS
Signature of Authorized Person

Form No. 631
Revised 09/07