



**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. 000504498

2. Name of Corporation The Triple Crown, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 29 COLLINS COURT

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 PROMOTE THE PEKINGESE (DOG) BREED

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
PRESIDENT	EDITH M. SNYDER	3658 5 MILE ROAD BROOKVILLE, PA 15825-6438 USA
TREASURER	ELIZABETH A TILLEY-POOLE	9455 SW 140 AVE DUNNELLON, FL 34432 USA
SECRETARY	SYLVIA REZNICK	1560 HEWLETT HEATH ROAD

		HEWLETT, NY 11557-1703 USA
VICE PRESIDENT	KATHY ELMY	RT 4 BRACKNEY, PA 18812 USA
DIRECTOR	NANCY CLARK	32 BURDICK AVE. EDMESTON, NY 13335-0021 USA
DIRECTOR	MARIA SAMPSON	11 JUNIPER COURT LAWRENCE TOWNSHIP, NJ 08648-4822 USA
DIRECTOR	REBA NAMACHAR	445 WHITESTOWN RD. BUTLER, PA 16001-2937 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

LYNDA AVANZATO, ESQ. 29 COLLINS COURT 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 21 Day of July, 2014 at 9:39:18 AM 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 EDITH M. SNYDER
Signature of Authorized Person

Form No. 631
Revised 09/07

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