



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 **2013**

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.

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|--|--------------------|---|---------------------------|---------------------|---------------------|
| 1. Entity ID No. 000307792 | | 2. Exact name of the Corporation Mt. Hope Cowboys | | | |
| 3. State of Incorporation RI | | 4. Brief description of the character of business conducted in Rhode Island TO PROVIDE YOUTH WITH THE OPPORTUNITY TO PARTICIPATE IN PHYSICAL, SPIRITUAL, AND MENTAL EXERCISE BY FOOTBALL OR CHEERLEADING. | | | |
| 5. Principal office address 199 CAMP ST | | City PROVIDENCE | State RI | Zip 02906 | |
| 6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> | | | | | |
| President Name Pamela Hughes | | Vice-President Name Herlin Perry | | | |
| Street Address 21 Peach Ave | | Street Address 206 Camp St | | | |
| City Providence | State RI | Zip 02906 | City Providence | State RI | Zip 02906 |
| Secretary Name Ericka Blyden | | Treasurer Name Denine Silva | | | |
| Street Address PO Box 46057 | | Street Address 206 Camp St | | | |
| City Providence | State RI | Zip 02940 | City Providence | State RI | Zip 02906 |
| 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 Lorenzo Perry | | Director Name Marc Bayha | | | |
| Street Address 96 Middle St Apt 3 | | Street Address 365 Diamond Hill Rd | | | |
| City Pawtucket | State RI | Zip 02860 | City Warwick | State RI | Zip 02886 |
| Director Name Ericka Blyden | | Director Name | | | |
| Street Address PO Box 46057 | | Street Address | | | |
| City Providence | State RI | Zip 02860 | City | State | Zip |
| 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. | | | | | |

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 OFFICE OF THE SECRETARY OF STATE
 CORPORATIONS DIV.

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

FILED

AUG 21 2014

File Date _____
 Check No _____
 By: _____
FOR SECRETARY OF STATE USE ONLY

BY *[Signature]* 12:52
 229-230780

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]
 Signature of Officer or Authorized Representative Date

Denine Silva
 Print or Type Name of Officer or Authorized Representative

Entity ID No. 000307792

Exact name of the Corporation: Mt. Hope Cowboys

Treasurer:

Demetrius Perry

68 Congress St.

Providence, RI 02907

SECRETARY OF STATE
CORPORATIONS DIV
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