



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. 000074805

2. Name of Corporation RHODE ISLAND WRESTLING ASSOCIATION

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 88 1/2 CHURCH STREET, APT. 17

City or Town: WEST WARWICK

State: RI Zip: 02893 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 USA WRESTLING AT ALL LEVELS THROUGHOUT THE STATE OF RI.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	MISTY LOURENCO	75 SANDY LANE WARWICK, RI 02889 USA
TREASURER	AMERICO LOMASTRO	88 1/2 CHURCH STREET APT 17 WEST WARWICK, RI 02893 USA
DIRECTOR	CRAIG OBARA	P.O. BOX 548

DIRECTOR	RICK FRANCIS	ALBION, RI 02802 USA 121 MAPLE AVE. MIDDLETOWN, RI 02842 USA
VICE PRESIDENT	CHRIS DRANCE	72 KING PHILIP AVE BRISTOL, RI 02809 USA
DIRECTOR	KIMBERLY SWANSON	181 CARLTON AVE WARWICK, RI 02889 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**

AMERICO A. LOMASTRO 88 1/2 CHURCH STREET, APT. 17 WEST WARWICK , RI 02893

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

Signed this 18 Day of November, 2014 at 12:02:45 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 AMERICO LOMASTRO
Signature of Authorized Person

Form No. 631
Revised 09/07

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