



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 **2014**

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. 000788991 | | 2. Exact name of the Corporation RI RIVERDOGS | | | |
| 3. State of Incorporation RI | | 4. Brief description of the character of business conducted in Rhode Island Operates a Youth Baseball Program that participates in the AAU Baseball League. | | | |
| 5. Principal office address 6 ENZO DRIVE | | | City COVENTRY | State RI | Zip 02816 |
| 6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> | | | | | |
| President Name ANTHONY FEOLE | | | Vice-President Name LINDA FEOLE | | |
| Street Address 6 ENZO DRIVE | | | Street Address 6 ENZO DRIVE | | |
| City COVENTRY | State RI | Zip 02816 | City COVENTRY | State RI | Zip 02816 |
| Secretary Name LINDA FEOLE | | | Treasurer Name ANTHONY FEOLE | | |
| Street Address 6 ENZO DRIVE | | | Street Address 6 ENZO DRIVE | | |
| City COVENTRY | State RI | Zip 02816 | City COVENTRY | State RI | Zip 02816 |
| 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 ANTHONY FEOLE | | | Director Name LINDA FEOLE | | |
| Street Address 6 ENZO DRIVE | | | Street Address 6 ENZO DRIVE | | |
| City COVENTRY | State RI | Zip 02816 | City COVENTRY | State RI | Zip 02816 |
| Director Name SEAN CAREY | | | Director Name NONE | | |
| Street Address 9 LINCOLN AVE | | | Street Address | | |
| City COVENTRY | State RI | Zip 02816 | 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. | | | | | |

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

2015 FEB 26 PM 12:08
 SECRETARY OF STATE
 CORPORATIONS DIV

12:09 pm
FILED

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.

File Date _____
 Check No _____
 By: _____

FEB 26 2015

Dave Huntoon _____ 2/5/15
 Signature of Officer or Authorized Representative Date

FOR SECRETARY OF STATE USE ONLY By 243290

KM

DAVE HUNTOON, CPA
 Print or Type Name of Officer or Authorized Representative