



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:** 2015

**1. Corporate ID No.** 000090064

**2. Name of Corporation** Portsmouth Babe Ruth League

**3. State of Incorporation**

State: RI

**4. Corporate Address in Rhode Island**

No. and Street: P.O. BOX 602  
City or Town: PORTSMOUTH State: RI Zip: 02871 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 GAME OF BASEBALL.

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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	ROBERT FRIEDMAN	OAKLAND TERRACE PORTSMOUTH, RI 02871 US
TREASURER	MICHAEL BUDDMEYER	73 POTOMAC RD PORTSMOUTH, RI 02871 US
SECRETARY	KELLE VIANA	302 WATER STREET

		PORTSMOUTH, RI 02871 US
VICE PRESIDENT	ROBERT CAMPION	9 BOURBON STREET PORTSMOUTH, RI 02871 US
DIRECTOR	JAY RICHARDSON	RANDELL LANE PORTSMOUTH, RI 02871 US
DIRECTOR	DEAN HLADICK	1522 EAST MAIN RD PORTSMOUTH, RI 02871 US
DIRECTOR	MATT VIANA	302 WATER STREET PORTSMOUTH, RI 02871 US

**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**

MICHAEL BUDDEMEYER 73 POTOMAC ROAD PORTSMOUTH , RI 02871

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

**Signed this 9 Day of March, 2015 at 4:34:38 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 MICHAEL BUDDEMEYER  
Signature of Authorized Person

Form No. 631  
Revised 09/07