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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.**

1. Entity ID No.	2. Exact name of the Corporation
000026673	**The National Tennis Club, Inc.**
3. State of Incorporation	4. Brief description of the character of business conducted in Rhode Island
Rhode Island	**To govern the affairs of The National Tennis Club, and preserve the game of court tennis.**

5. Principal office address	City	State	Zip
c/o John A. Murphy, 77 Narragansett Ave.	**Jamestown**	**RI**	**02835**

6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) ☐

President Name	Vice-President Name
Stephen J. DeVoe III	**Brewer Rowe**
Street Address: **60 Dumplings Drive**	Street Address: **8 Cliff Terrace**
City: **Jamestown** State: **RI** Zip: **02835**	City: **Newport** State: **RI** Zip: **02840**
Secretary Name: **Sidney Gorham**	Treasurer Name: **James B. Packham**
Street Address: **104 Mill St.**	Street Address: **3 Gordon St.**
City: **Newport** State: **RI** Zip: **02840**	City: **Newport** State: **RI** Zip: **02840**

7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) ☑

Director Name	Director Name
Street Address	Street Address
City / State / Zip	City / State / Zip
Director Name	Director Name
Street Address	Street Address
City / State / Zip	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

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SECRETARY OF STATE
CORPORATIONS DIV

File Date _____
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By: _____
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By 2462175
A.A. 8:54 A.M.

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.

Member Board of Governors 4/3/2015
Signature of Officer or Authorized Representative Date

John A. Murphy
Print or Type Name of Officer or Authorized Representative

Form No. 631
Revised: 04/2014
119553-2-1010290

NATIONAL TENNIS CLUB

Non-Profit Corporation Annual Report for Year 2014

Attachment for Item 7 – List of Directors

Director Name	Address
John Damon	95 Taylor Road, Portsmouth, RI 02871
William L. Burgin	150 Bellevue Avenue, Newport, RI 02840
John. A. Murphy	77 Narragansett Avenue, Jamestown, RI 02835
Frank Oliveira	375 Middle Road, Portsmouth, RI 02871
Brewer Rowe	8 Cliff Terrace, Newport, RI 02840
Petra Napolitano	325 Seaside Avenue, Jamestown, RI 02835
Athol D. Cochrane	25 William Drive, Middletown, RI 02842
Ross S. Cann	729 Bellevue Avenue, Newport, RI 02840
THOMAS B. ROWE	65 BAILEY AVENUE, MIDDLETOWN RI 02842
SIDNEY GORHAM	MILL ST NEWPORT RI 02840
JAMES B. PACKHAM	3 GORDON STREET NEWPORT RI 02840
STEPHEN J. DEVOE	60 DUMPLINGS DRIVE JAMESTOWN RI 02835