



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. 000062035

2. Name of Corporation AQUIDNECK ISLAND ALL-VETS CLUB, INC.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 985 AQUIDNECK AVENUE

City or Town: MIDDLETOWN

State: RI Zip: 02842 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

SOCIAL CLUB

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	THOMAS NEY	70 WYATT ROAD MIDDLETOWN, RI 02842 USA
TREASURER	ROBIN NEY	70 WYATT ROAD MIDDLETOWN, RI 02842 USA
SECRETARY	MARY CONNOR	5 PARK DR

		MIDDLETOWN, RI 02842 USA
VICE PRESIDENT	ARTHUR DENNIS	SIMMONS ST NEWPORT , RI 02840 USA
DIRECTOR	JAY JACOME	985 AQUIDNECK AVE MIDDLETOWN, RI 02842 USA
DIRECTOR	LOCKWOOD LYONS	30 EVARTS ST NEWPORT , RI 02840 USA
DIRECTOR	MICHAEL J. MOITOZA	75 PHELPS ROAD MIDDLETOWN, RI 02842 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

GREGORY B. KLAIBER, ESQ. 38 BELLEVUE AVENUE NEWPORT , RI 02840

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

Signed this 12 Day of May, 2015 at 4:50:51 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 THOMAS NEY
Signature of Authorized Person

Form No. 631
Revised 09/07

© 2007 - 2015 State of Rhode Island and Providence Plantations
All Rights Reserved