



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. 000513209

2. Name of Corporation Smithfield Swimming Booster Club

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: P.O. BOX 94
City or Town: GREENVILLE State: RI Zip: 02828 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 SPORT OF COMPETITIVE SWIMMING AMONG THE YOUTH OF SMITHFIELD, 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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	MICHELE DECOSTE	21 COLWELL ROAD GREENVILLE, RI 02828 USA
TREASURER	LORI COTE	4 HEMLOCK COURT GREENVILLE, RI 02828 USA

SECRETARY	JEAN EATON	75 MOUNTAINDALE ROAD SMITHFIELD, RI 02917 USA
VICE PRESIDENT	VERA RAY	15 MAGNUM COURT, #12 SMITHFIELD, RI 02917 USA
DIRECTOR	MICHELE DECOSTE	21 COLWELL ROAD GREENVILLE, RI 02828 USA
DIRECTOR	VERA RAY	15 MAGNUM COURT # 12 SMITHFIELD, RI 02917 USA
DIRECTOR	LORI COTE	4 HEMLOCK COURT GREENVILLE, RI 02828 USA
DIRECTOR	JEAN EATON	75 MOUNTAINDALE ROAD SMITHFIELD, RI 02917 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

MICHELE DECOSTE 21 COLWELL ROAD GREENVILLE , RI 02828

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

Signed this 16 Day of May, 2015 at 6:42:49 AM 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 MICHELE L. DECOSTE
Signature of Authorized Person

Form No. 631
Revised 09/07