



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

Foreign Non-Profit
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. 000103829

2. Name of Corporation CONTINENTAL DORSET CLUB, INC.

3. State of Incorporation

State: PA

4. Corporate Address in Rhode Island

No. and Street: 1125 DANIELSON PIKE

City or Town: NORTH SCITUATE

State: RI Zip: 02857 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 COLLECT, VERIFY, PRESERVE AND PUBLISH RELIABLE FACTS PERTAINING TO THE HISTORY AND BREEDING OF DORSET SHEEP AND TO PROMOTE THE INTEREST OF THE BREED BY ALL HONORABLE MEANS.

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	JOHNNIE JOHNSON	25265 CARLSBAD AVE DAVIS, CA 95616 USA
SECRETARY	DEBRA HOPKINS	1125 DANIELSON PIKE NORTH SCITUATE, RI 02857 US
DIRECTOR	COULTER PASSWATERS	SHEPHERDS VIEW LANE BRIDGEVILLE, DE 19933 USA

VICE PRESIDENT	MARK IUNGHUHN	1138 E 200 N PRINCETON, IN 47670 USA
DIRECTOR	CASEY SIDWELL	31306 WCR 57 GILL, CO 80624 USA
DIRECTOR	DICK REECE	1481 E SR 133 ARCOLA, IL 61910 USA
DIRECTOR	MIKE WRIGHT	314 PRATT RD ALSTEAD, NH 03602 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**

DEBRA HOPKINS 1125 DANIELSON PIKE NORTH SCITUATE , RI 02857

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

Signed this 5 Day of June, 2015 at 6:03:32 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 DEBRA HOPKINS
Signature of Authorized Person

Form No. 631
Revised 09/07