



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. 000030524

2. Name of Corporation Rhode Island Motorcycle Association

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: PO BOX 40344

City or Town: PROVIDENCE State: RI Zip: 02940 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

EDUCATION & MONITORING OF MOTORCYCLE ACTIVITIES

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	KRISTIN JAMISON	195 MODENA AVE PROVIDENCE, RI 02908 USA
TREASURER	DAVID MARTINELLI	389 MAIN ST. PAWTUCKET, RI 02860 USA
SECRETARY	JOHN BIGELOW	PO BOX 61

		CAROLINA, RI 02812 USA
VICE PRESIDENT	PAUL BOND	HOBART ST WESTERLY, RI 02891 USA
DIRECTOR	KRISTIN JAMISON	195 MODENA AVE PROVIDENCE, RI 02908 USA
DIRECTOR	BUD CARDOSO	74 EARL AVE RIVERSIDE, RI 02915 USA
DIRECTOR	NICK NIQUETTE	10 BAYBERRY RD WOONSOCKET, RI 02895 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**

BUD CARDOSO 74 EARL AVENUE RIVERSIDE , RI 02915

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

Signed this 8 Day of June, 2015 at 8:48:00 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 KRISTIN JAMISON
Signature of Authorized Person

Form No. 631
Revised 09/07

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