

## 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 C				R THE	YEAR_	2012	
Filing Period: June 1 - June 1	une 30 • This re URE TO FILE 1	eport must be typed THIS REPORT BY JU	or printed legibly. JLY 30 WILL RESULT IN	∛ A \$25.00	PENALTY F	EE. 2015	000
1. Entity ID No.	2. Exact name o	f the Corporation	<u> </u>			JUN	- <del> </del>
066029792	R	hode Isla	nd Commo	dore	<b>'</b>	JN 26	
3. State of Incorporation	4. Brief description	on of the character of bu	isiness conducted in Rhode	Island			<u> </u>
R.I						PH 2:	S D S
5. Principal office address 315 Iron Ho	rse Way	Sule 101	City	Ce	State RI	Zip N 02908	8
6. LIST ALL OFFICERS (NAMES President Name	AND ADDRESS	ES) ("X" BOX FOR AT	TACHMENT) Vice-President Name			and the state of	Ada
Colin P. H	<i>(ane</i>		Stefa	n Pri	Jac		
Street Address Zo Newn	nan Ave	-	Street Address State		•		
	State RI	02916	City Providence		State RI	0296	3
Secretary Name David Deferrillo			Treasurer Name Harr	4 B	aird		
Street Address 315 (ron b	torse Wa	4 Suite 101	Street Address 409 We	•	ach Dr	,	
Providence	State RI	02908	City Jamestow	n	State RT	Zip 0283	
7. LIST ALL DIRECTORS (NAME ("X" BOX FOR ATTACHMENT)	S AND ADDRES	SES). RHODE ISLAND	CORPORATIONS MUST	LIST NO L	ESS THAN TI	IREE (3) DIREC	CTORS
Director Name			Director Name				
Street Address			Street Address		_ <del></del>		_
City	State	Zip	City		State	Zip	
Director Name			Director Name			<u> </u>	
Street Address			Street Address	· · · · · · · · · · · · · · · · · · ·			
City	State	Zip	City		State	Żip	
8. REGISTERED AGENT IN RHOD	and the second second second second second		inder sept. Bellione	g er dik k			
This information is currently of re	ecord in the Offic	ce of the Secretary of	State. Changes require fil	ing Form 6	41		
This report must be signed by either or Trustee	r the President, Vi	ice-President, Secretary	r, Assistant Secretary, Treas	eurer, duly A	uthorized Rep	resentative, Re	ceiver
File Date	2009-00-52-530 884-2-5-55-5482 33-5-5-5-5-5-5-5-5-5-5-5-5-5-5-5-5-5-5-	FILED	<ul> <li>Under penalty of perjuithis report, including a and that all statements</li> </ul>	ny accomp	anying sched	lules and state	ments.
Check No.		JUN 26 2015	_ Daniel	( Ol	Retull	6/27	15
FOR SECRETARY OF STATE US	SEONLY BY_	an 25/77	Signature of Officer or At	thorized Re	epresentative	Date	
Form No. 631		2.15	Print or Type Name of Of	ficer or Aut	Yetrilla Porized Repres	o Sentative	

Form No. 631 Revised: 04/2014

## Rhode Island Commodores - 2015 Board of Governors

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