



**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. 000903521

2. Name of Corporation Aquidneck Island Outreach, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 11 FRANCIS STREET

City or Town: NEWPORT

State: RI

Zip: 02840

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

AQUIDNECK ISLAND OUTREACH, INC. IS ORGANIZED AND OPERATED EXCLUSIVELY FOR EDUCATIONAL, CHARITABLE, AND/OR RELIGIOUS PURPOSES WITHIN THE MEANING OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE OF 1986, AS AMENDED, OR TO ANY CORRESPONDING PROVISION OF ANY FUTURE FEDERAL TAX LAW, AS FOLLOWS: (A) TO ORGANIZE, PROMOTE AND HOST ATHLETIC EVENTS AND/OR OTHER PERFORMING ARTS EVENTS; (B) THROUGH SUCH ACTIVITIES, TO REACH-OUT, SUPPORT, AND MENTOR THE LESS FORTUNATE AND DISADVANTAGED CHILDREN RESIDING ON AQUIDNECK ISLAND (C) TO DESIGN, MANUFACTURE AND/OR SELL PRODUCTS RELATED TO, AND IN SUPPORT OF, SUCH ACTIVITIES; (D) TO CARRY ON ANY OTHER BUSINESS OR ACTIVITY WHICH MAY LAWFULLY BE CARRIED ON BY A NONPROFIT CORPORATION ORGANIZED UNDER R.I. GEN. LAWS § 7-6, WHETHER OR NOT RELATED TO THOSE REFERRED TO IN THE PRECEDING PARAGRAPHS.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	SCOTT GRAMER NICHOLSON	63 POPLAR STREET NEWPORT, RI 02840 USA
TREASURER	PATRICK THOMAS SHEERIN	11 FRANCIS STREET NEWPORT, RI 02840 USA
VICE PRESIDENT	WALTER MEY	170 COMPTON VIEW DR. MIDDLETOWN, RI 02842 USA
VICE PRESIDENT	TERRY MEY	110 COMPTON VIEW DR. MIDDLETOWN, RI 02842 USA
DIRECTOR	PATRICK THOMAS SHEERIN	11 FRANCIS STREET NEWPORT, RI 02840 USA
DIRECTOR	SCOTT GRAMER NICHOLSON	63 POPLAR STREET NEWPORT, RI 02840 USA
DIRECTOR	WALTER MEY	170 COMPTON VIEW DR. MIDDLETOWN, RI 02842 USA
DIRECTOR	TERRY MEY	110 COMPTON VIEW DR. 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**

PATRICK T. SHEERIN 11 FRANCIS STREET 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 9 Day of August, 2015 at 3:29:07 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 PATRICK T. SHEERIN
Signature of Authorized Person

Form No. 631
Revised 09/07