



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. 000030346

2. Name of Corporation Portsmouth High Athletic Booster's Association

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: P.O. BOX 438
City or Town: PORTSMOUTH State: RI Zip: 02871 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

FUND RAISING ORGANIZATION THAT SUPPORTS ATHLETES AT PORTSMOUTH HIGH SCHOOL

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
TREASURER	JOHN HAMILTON	50 SPRING HILL RD PORTSMOUTH, RI 02871 USA
SECRETARY	LAURA RABENOLD	214 SPRING HILL RD PORTSMOUTH, RI 02871 USA

PRESIDENT	GARY EGGEMAN	109 MALEE TERRACE PORTSMOUTH, RI 02871 USA
VICE PRESIDENT	KEVIN DELUCA	105 MADISON WAY PORTSMOUTH, RI 02871 USA
DIRECTOR	LISA CAFFERTY	73 SLOOP DR PORTSMOUTH, RI 02871 USA
DIRECTOR	MARK GOULART	26 STANTON RD PORTSMOUTH, RI 02871 USA
DIRECTOR	TRISTAN CAFFERTY	73 SLOOP DR PORTSMOUTH, RI 02871 USA
DIRECTOR	CHARLENE EGGEMAN	109 MALEE TERRACE PORTSMOUTH, RI 02871 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**

DAVID F. FOX, ESQ. 850 AQUIDNECK AVENUE, SUITE B-11 MIDDLETOWN , RI 02842

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

Signed this 30 Day of November, 2015 at 3:51:09 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 GARY EGGEMAN
Signature of Authorized Person

Form No. 631
Revised 09/07