



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 CORPORATION ANNUAL REPORT FOR THE YEAR **2015**

Filing Period: June 1 - June 30 • This report must be typed or printed legibly.

Filing Fee: \$20.00 • FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 000027901		2. Exact name of the Corporation Glocester Country Club			
3. State of Incorporation Rhode Island		4. Brief description of the character of business conducted in Rhode Island Operation of a non-profit golf, tennis and swim club			
5. Principal office address PO Box 547		City Greenville		State RI	Zip 02828
LIST ALL OFFICERS (NAMES AND ADDRESSES) (X) BOX FOR:					
President Name Thomas E. Hefner		Vice-President Name Lodovico Uriati			
Street Address 2970 Mendon Rd. Unit 123		Street Address 37 Brown School Rd.			
City Cumberland	State RI	Zip 02864	City Glocester	State RI	Zip 02814
Secretary Name Michael Tartaglia		Treasurer Name Roger Warren			
Street Address 3 Greenbrier Rd.		Street Address 15 West Greenville Rd.			
City Greenville	State RI	Zip 02828	City Smithfield	State RI	Zip 02828
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS MUST LIST NO LESS THAN THREE (3) DIRECTORS (X) BOX FOR ATTACHMENT ☒					
Director Name James Hopkins		Director Name David Graham			
Street Address 1 Cedar Grove Drive		Street Address 97 Pineledge Rd.			
City Greenville	State RI	Zip 02828	City Greenville	State RI	Zip 02828
Director Name Richard Mollicone		Director Name Joseph Filocco			
Street Address 20 Appletown Rd.		Street Address 11 Whispering Pine Terrace			
City Greenville	State RI	Zip 02828	City Greenville	State RI	Zip 02828
8. REGISTERED AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 641.					

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

FILED

DEC 09 2015

File Date

Check No

By:

BY

Thomas E. Hefner

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer or Authorized Representative

12-8-2015

Date

Thomas E. Hefner, President

Print or Type Name of Officer or Authorized Representative

Glocester Country Club - # 000027901

#7 Continuation – Board of Directors

John Martin, IV – 9 Pembroke Drive, Johnston, R.I. 02919

Greg Kernan – 28 Saw Mill Rd., PO Box161 Harmony, R.I. 02829

William Worthy – 26 Edgewood Rd., Chepachet, R.I. 02814

Robert Labrie, Jr. – 140 Aldrich Rd., N. Scituate, R.I. 02857