State of	of Rhode Island and Pro Office of the Secreta		Fee: \$20.00		
	Division Of Business 148 W. River St				
	Providence RI 0290				
HODE	(401) 222-304				
	NOFE STATES				
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. 000139689					
2. Name of Corporation Rhode Island Lacrosse Association					
3. State of Incorporation					
State: <u>RI</u>					
4. Corporate Address in Rhode Island					
No. and Street: 9 LARCH ROAD					
	REENWICH State:	RI Zip: <u>02818</u> Country	y: USA		
5. Foreign Corporation. Enter Principal Office Address					
No. and Street:					
City or Town: State: Zip	p: Country:				
6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island					
TO GROW, UNIFY AND PROMOTE MEN'S AND WOMEN'S LACROSS IN RHODE ISLAND					
WITH EMPHASIS IN THE DEVELOPMENT OF YOUTH LEAGUE					
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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete				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	Address			
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Co	ode, Country		
PRESIDENT	JONATHAN E SOULE 85 CANTERB	85 CANTERBURY LA EAST GREENWICH, RI 02818			
TREASURER	ROBERT GESSMAN	9 LARCH ROAD			

EAST GREENWICH, RI 02818 USA

VICE PRESIDENT	RALPH IZZI	PO BOX 1312 COVENTRY, RI 02816 USA		
DIRECTOR	DONALD DUNWOODY	2080 FRENCHTOWN ROAD EAST GREENWICH, RI 02818 USA		
DIRECTOR	JAY GOLDRICK	34 NORTH UNION STREET LINCOLN, RI 02865		
<ul> <li>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</li> <li>DOUGLAS A. CANIGLIA <u>1283 MENDON ROAD</u> <u>CUMBERLAND</u>, <u>RI 02864</u></li> <li>9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.</li> </ul>				
<ul> <li>Signed this 5 Day of January, 2016 at 5:05:24 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.</li> <li>By <u>ROBERT GESSMAN</u> Signature of Authorized Person</li> </ul>				
Form No. 631 Revised 09/07				
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