



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: 2016

1. Corporate ID No. 000121147

2. Name of Corporation NORTH PROVIDENCE BOYS & GIRLS CLUB ALUMNI ASSOCIATION

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 14 BREAKNECK HILL RD

City or Town: LINCOLN

State: RI Zip: 02865 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

TO PROVIDE BOTH VOLUNTEER AND FINANCIAL SUPPORT

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	DAVID DERUOSI	75 GEORGIA AVENUE NORTH KINGSTOWN, RI 02852 USA
TREASURER	DAVID RICCI	17 FORESTWOOD DRIVE SMITHFIELD, RI 02917 USA

SECRETARY	KAREN LOMAX	16 BECKSIDE ROAD NORTH PROVIDENCE, RI 02911 USA
SECRETARY	KAREN ANN LOMAX	1363 SMITH ST. APT 406 NORTH PROVIDENCE, RI 02911 USA
ASSISTANT SECRETARY	CONNIE MCCLURG	33 HOMEWOOD AVENUE NORTH PROVIDENCE, RI 02911 USA
VICE PRESIDENT	JOSEPH SIMEONE	42 ROOSEVELT DRIVE BRISTOL, RI 02809 USA
DIRECTOR	DAVID RICCI	17 FORESTWOOD DRIVE SMITHFIELD, RI 02917 USA
DIRECTOR	DAVID DEROUSI	75 GEORGIA AVENUE NORTH KINGSTOWN, RI 02852 USA
DIRECTOR	JOSEPH SIMEONE	42 ROOSEVELT DRIVE BRISTOL, RI 02809 USA
DIRECTOR	KAREN LOMAX	16 BECKSIDE ROAD NORTH PROVIDENCE, RI 02911 USA
DIRECTOR	CONNIE MCCLURG	33 HOMEWOOD AVENUE NORTH PROVIDENCE, RI 02911 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**

SANTINO A. MARTINELLI, ESQ. 14 BREAKNECK HILL ROAD, SUITE 200 LINCOLN , RI 02865

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

Signed this 18 Day of May, 2016 at 10:08:04 AM 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 KAREN A. LOMAX
Signature of Authorized Person

Form No. 631
Revised 09/07