



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. 000789444

2. Name of Corporation Rhode Island Soaring Club Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 123 JOHNSON BLVD

City or Town: COVENTRY

State: RI

Zip: 02816

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

THE RISC SOARING CLUB IS DEDICATED TO THE EDUCATION AND PROMOTION OF RADIO CONTROLLED AVIATION.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	ALEX HALL	57 POWEL AVE NEWPORT, RI 02840 USA
TREASURER	DONALD ROBERT GOFFE	123 JOHNSON BLVD COVENTRY, RI 02816 USA

SECRETARY	JEFFERY LANDSMAN	63 GREYLOCK DR. PORTSMOUTH, RI 02871 USA
VICE PRESIDENT	MAARTEN BROESA	17 GREENWOOD LN LINCOLN, RI 02866 USA
DIRECTOR	ALEX HALL	57 POWEL AVE NEWPORT, RI 02840 USA
DIRECTOR	DONALD GOFFE	123 JOHNSON BLVD COVENTRY, RI 02816 USA
DIRECTOR	JEFFERY LANDSMAN	63 GREYLOCK DR 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**

DONALD GOFFE 123 JOHNSON BOULEVARD COVENTRY , RI 02816

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

Signed this 23 Day of May, 2016 at 10:06:51 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 DONALD GOFFE
Signature of Authorized Person

Form No. 631
Revised 09/07

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