

CUSTOMER SERVICE ID NO. 974005



State of Rhode Island
and Providence Plantations

Office of the Secretary of State

PIN NO. 4184

NEILL M GOKBEN

Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2016

Filing Period: June 1 - June 30 • Filing Fee: \$20.00* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

* In accordance with R.I.G.L. 7-6-91, 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.

1. Corporate ID No. 30736		2. Name of Corporation YOUNG PANNSE SOCIAL CLUB	
3. State of Incorporation RHODE ISLAND		4. Corporate address in Rhode Island - Street Address PROMOTING GOOD BROTHERHOOD AND SPORTSMANSHIP	
5. Foreign corporation, enter principal office address 187 POHASSET AVE		City PROVIDENCE	Zip 02909
6. Enter Description of the character of the affairs which are actually conducted in Rhode Island		State RI	Zip 02909
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name PETER GONTE CONTE JR.		Vice President Name JASON PATRONE	
Street Address 14 SARRINGE WAY		Street Address 992 ATWOOD AVE	
City PROVIDENCE	State R.I.	City JOHNSTON	State R.I.
Zip 02904		Zip 02919	
Secretary Name		Treasurer Name FRANK BOFFI	
Street Address		Street Address 83 WIN SOR AVE	
City	State	City JOHNSTON	State R.I.
Zip		Zip 02920	
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS			
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23			
Director Name PAUL SEPE		Director Name DAVID FULLER	
Street Address 41 DONALD LEWIS DRIVE		Street Address PROVIDENCE	
City SEELONK	State MASS	City PROVIDENCE	State R.I.
Zip 02771		Zip 02909	
Director Name WILLIAM SANTILLI		Director Name	
Street Address 58 ATELLAN AVE		Street Address	
City	State	City CRAVSTON	State R.I.
Zip		Zip 02920	
9. REGISTERED AGENT IN RHODE ISLAND			
This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-78			

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

PRESENT AGENT SK. 02910
415 LEGION WAY CRAVSTON, R.I., 02910



Mr. John Spremulli
45 Legion Way
Cranston, RI 02910-2749

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.

SIGNED BY DAVID FULLER 5/17/16
Signature of Officer Date

David Fuller
Print or Type Name of Officer

SECRETARY
Title of Officer

FILED

MAY 23 2016

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File Date	4209
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