



**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. 000812191

2. Name of Corporation Beat the Streets Providence

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 199 HOWELL STREET

City or Town: PROVIDENCE

State: RI Zip: 02906 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 MISSION OF BEAT THE STREETS PROVIDENCE IS TO PUT A WRESTLING MAT, TEAM, AND COACH IN EVERY PUBLIC MIDDLE SCHOOL, AND LATER HIGH SCHOOL, IN PROVIDENCE RI. THE INTENT OF THIS EFFORT IS TO USE THE POWER OF SPORT, AND MORE SPECIFICALLY WRESTLING, IN ORDER TO HELP DEVELOP AND EMPOWER THE YOUTH OF PROVIDENCE RI. BY PUTTING PROVIDENCE DISADVANTAGED YOUTH ON A WRESTLING MAT BEAT THE STREETS PROVIDENCE WILL BE KEEPING THEM IN A POSITIVE AFTER SCHOOL ENVIRONMENT, INTRODUCING THEM TO STRONG MENTORS, TEACHING THEM SELF CONFIDENCE, SELF WORTH, AND CONSEQUENTLY TO REACH FOR SUCCESS, EFFECTIVELY "BEAT(ING) THE STREETS"; AND ANY OTHER PURPOSE FOR WHICH ENTITIES MAY BE FORMED UNDER THE R.I. NON-PROFIT CORPORATION ACT.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	BILLY DAVID WATTERON	180 BOWEN STREET, UNIT 8 PROVIDENCE, RI 02906 USA
DIRECTOR	CRAIG ANTHONY POWELL	321 DARTMOUTH STREET, UNIT 1 BOSTON, MA 02116 USA
DIRECTOR	JENNIFER LOUISE WOOD	312 MORRIS AVE PROVIDENCE, RI 02906 USA
DIRECTOR	DOMINGO MOREL	290 LEGION WAY CRANSTON, RI 02910 USA
DIRECTOR	GWENDOLYN APONTE-ANDRADE	POST OFFICE BOX 28113 PROVIDENCE, RI 02908 USA
DIRECTOR	GREGORY FINE	14 HARVEST DRIVE CUMBERLAND, RI 02864 USA
DIRECTOR	ROB DAVIDSON	144 GEORGETOWN DRIVE GLASTONBURY, CT 06033 USA
DIRECTOR	MICHAEL KELLY	128 DORRANCE STREET, SUITE 300 PROVIDENCE, RI 02906 USA
DIRECTOR	NATHAN MYERS	223 ENDICOTT STREET, APT 2 BOSTON, MA 02113 USA
DIRECTOR	JASON DENNIS	54 ORTOLEVA DR PROVIDENCE, RI 02906 USA
DIRECTOR	KEVIN MCCARTHY	36 MINUTEMAN RD MEDFIELD, MA 02052 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

WILLIAM WATTERSON 180 BOWEN STREET, THIRD FLOOR, UNIT 8 PROVIDENCE , RI 02906

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

Signed this 26 Day of May, 2016 at 6:46:03 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.*

By WILLIAM WATTERSON
Signature of Authorized Person

Form No. 631
Revised 09/07

