



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. 000799184

2. Name of Corporation SWIMRI, INC.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 24 SOUTH FAIR ST

City or Town: WARWICK

State: RI

Zip: 02888

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

SOCIAL AND RECREATIONAL PURPOSES

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
DIRECTOR	MATTHEW ALEXANDER EMMERT	37 CONNECTION STREET, APT. 1 MIDDLETOWN, RI 02842 USA
DIRECTOR	TRENT DAVID THEROUX	71 ANNAWAMSCUTT ROAD BARRINGTON, RI 02806 USA
DIRECTOR	DAVID D PRIOR	25 SOUTH FAIR STREET

		WARWICK, RI 02888 USA
DIRECTOR	DAVID D PRIOR	24 SO. FAIR ST WARWICK, RI 02888 US
DIRECTOR	FRANK MCQUIGGAN	162 SCHUYLER STREET EAST PROVIDENCE, RI 02914 USA
DIRECTOR	DOUGLAS JEFFREY SAYLES	615 INDIAN AVENUE MIDDLETOWN, RI 02842 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**

DAVID D. PRIOR 24 SOUTH FAIR STREET WARWICK , RI 02888

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

Signed this 31 Day of May, 2016 at 2:24:47 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 DDP
Signature of Authorized Person

Form No. 631
Revised 09/07

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