



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. 000029257

2. Name of Corporation Circolo Maria S. S. Del Carmine

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 14 GARFIELD AVENUE

City or Town: CRANSTON

State: RI Zip: 02920 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 326 UNION AVENUE

City or Town: CRANSTON State: RI Zip: 02909 Country: USA

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

SOCIAL CLUB

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	STEVEN WALTER YUPPA	52 BURGES AVENUE EAST PROVIDENCE, RI 02914 USA
TREASURER	THOMAS JOSEPH YUPPA	53 COLUMBUS AVENUE #102 NORTH PROVIDENCE, RI 02911 USA
SECRETARY	DEBRA PARDONE	79 FORDSION STREET

		CRANSTON, RI 02920 USA
VICE PRESIDENT	EULOGIO CLAMOR	103 APPLETON STREET CRANSTON, RI 02920 USA
DIRECTOR	PHILIP OSGOOD SR	65 BURR STREET CRANSTON, RI 02920 USA
DIRECTOR	TIMOTHY ANDERSON	17 WINTHROP STREET WEST WARWICK, RI 02893 USA
DIRECTOR	STEVEN COLODO	46 BLAINE STREET CRANSTON, RI 02920 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**

MICHAEL SEPE 14 GARFIELD AVENUE CRANSTON , RI 02920

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

Signed this 1 Day of June, 2016 at 5:00:10 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 THOMAS J. YUPPA
Signature of Authorized Person

Form No. 631
Revised 09/07