



**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. 000293157

2. Name of Corporation Ocean State DragonBoat Club

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 46 LAKE SHORE DR

City or Town: JOHNSTON

State: RI

Zip: 02919

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

TO PROMOTE AND DEVELOP THE SPORT OF DRAGON BOATING

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	CARLOS COSTA	46 LAKE SHORE DR JOHNSTON, RI 02919 USA
TREASURER	MEAGHAN ARNOLD	200 POST RD WARWICK, RI 02886 USA
CLERK	JENNIFER POTTER	50 CENTRAL STREET

		MAPLEVILLE, RI 02839 USA
VICE PRESIDENT	JAMES FRECHETTE	390 WALCOTT ST PAWTUCKET, RI 02860 US
DIRECTOR	JAMES FRECHETTE	390 WALCOTT ST PAWTUCKET, RI 02860 US
DIRECTOR	CARLOS COSTA	46 LAKE SHORE DR JOHNSTON, RI 02919 USA
DIRECTOR	MEGHAN TIBBITTS	200 POST RD WARWICK, RI 02886 USA
DIRECTOR	JENNIFER POTTER	50 CENTRAL STREET MAPLEVILLE, RI 02839 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**

CARLOS A COSTA 46 LAKESHORE DRIVE JOHNSTON , RI 02919

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

Signed this 2 Day of June, 2016 at 1:07:28 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 CARLOS A COSTA
Signature of Authorized Person

Form No. 631
Revised 09/07

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