



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

Foreign Non-Profit
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. 000096626

2. Name of Corporation AMERICAN YOUTH SOCCER ORGANIZATION

3. State of Incorporation

State: CA

4. Corporate Address in Rhode Island

No. and Street: 222 JEFFERSON BLVD.

SUITE 200

City or Town: WARWICK

State: RI Zip: 02888 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 19750 S VERMONT AVE

SUITE 200

City or Town: TORRANCE State: CA Zip: 90502 Country:

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

TO PROMOTE YOUTH SOCCER.

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	MARK STEWART	1455 KEHAULANI KAILUA, HI 96734 USA
TREASURER	BOB C DANIEL	10429 PRESTWICK NE ALBUQUERQUE, NM 87111 USA
SECRETARY	AARON LUCE	6601 TENNYSON STREET NE ALBUQUERQUE, NM 87111 USA
DIRECTOR	FREDRICK FREEMAN	3020 OLD RANCH PARKWAY, SUITE 300

		SEAL BEACH, CA 90740 USA
DIRECTOR	JEFFREY G MCCLURE	245 APPIAN COURT MARTINEZ, CA 94553 USA
DIRECTOR	DONNA D NELSON	4404 SANDBROOK WAY BAKERSFIELD, CA 93301 USA
DIRECTOR	MIKE HOYER	19750 S. VERMONT AVE TORRANCE , CA 90502 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**

NATIONAL REGISTERED AGENTS, INC. 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST
PROVIDENCE , RI 02914

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

Signed this 9 Day of June, 2016 at 2:45:00 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 MICHELLE YAPELLI
Signature of Authorized Person

Form No. 631
Revised 09/07

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