



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. 000029309

2. Name of Corporation Pawtucket Country Club

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 900 ARMISTICE BOULEVARD

City or Town: PAWTUCKET

State: RI Zip: 02861 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

COUNTRY CLUB AND GOLF COURSE

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	DAVID F. RAMPONE	14 EAST BUTTERFLY WAY LINCOLN WAY, RI 02865 USA
TREASURER	MICHAEL DOLAN	74 YORD ROAD MANSFIELD, MA 02048 USA
SECRETARY	DAVID SPENCER	1315 NEWMAN AVE

		SEEKONK, MA 02771 USA
DIRECTOR	MICHAEL REGO	30 SUNSET DR SEEKONK, MA 02771 USA
DIRECTOR	MICHAEL MULVEY	52 BRIARBROOK DR SEEKONK, MA 02771 USA
VICE PRESIDENT	JOSEPH GREEN	385 E FOXBORO ST SHARON, MA 02067 USA
DIRECTOR	KEN DEMERS	88 HOOD AVE RUMFORD, RI 02861 USA
DIRECTOR	SCOTT DONAHUE	99 GREGORY DR SEEKONK, MA 02771 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**

ARTHUR F. LEBEAU 900 ARMISTICE BOULEVARD PAWTUCKET , RI 02861

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

Signed this 15 Day of June, 2016 at 10:14:05 AM 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 JIM WACKELL
Signature of Authorized Person

Form No. 631
Revised 09/07

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