



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. 000088879

2. Name of Corporation Blackstone Valley Motorcycle Chapter

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 269 ARMISTICE BOULEVARD
PRECISION HARLEY DAVIDSON

City or Town: PAWTUCKET

State: RI Zip: 02860 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 RECREATE BY MEETING REGULARLY AND RIDING MOTORCYCLES.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	MICHAEL CABRAL	239 RAMA ST TAUNTON, MA 02780 USA
TREASURER	SUSAN LYNCH	64 CHESTNUT HILL AVE CRANSTON, RI 02920 USA

SECRETARY	JOSEPH ALBERT	74 BEDFORD STREET BRIDGEWATER, MA 02324 USA
VICE PRESIDENT	CHARLES EHRENBERG	70 FRUIT ST MANSFIELD, MA 02048 USA
DIRECTOR	MICHAEL CABRAL	239 RAMA ST TAUNTON, MA 02780 USA
DIRECTOR	CHARLES EHRENBERG	70 FRUIT ST MANSFIELD, MA 02048 USA
DIRECTOR	JOSEPH ALBERT	74 BEDFORD ST BRIDGEWATER, MA 02324 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

PRECISION HARLEY DAVIDSON 269 ARMISTICE BOULEVARD PAWTUCKET , RI 02860

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

Signed this 17 Day of June, 2016 at 11:00:48 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 JOSEPH A ALBERT
Signature of Authorized Person

Form No. 631
Revised 09/07

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