



State of Rhode Island  
and Providence Plantations  
Office of the Secretary of State

A. Ralph Mollis, Secretary of State  
Corporations Division  
148 W. River Street  
Providence, RI 02904-2615  
401.222.3040

**NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2016**

**Filing Period:** June 1 - June 30 • **Filing Fee:** \$20.00\* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

\* 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.

1. Corporate ID No. 30244		2. Name of Corporation THE TOWNSMEN CLUB			
3. State of Incorporation RHODE ISLAND		4. Corporate address in Rhode Island - Street Address 66 TOWNSMEN WAY		City MAPLEVILLE	Zip 02839
5. Foreign corporation. Enter principal office address			City	State	Zip
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island SOCIAL AND FRATERNAL ACTIVITY					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name THOMAS V. ROMANO			Vice President Name WAYNE RICHARDSON		
Street Address 342 BROOK ROAD			Street Address 352 LAKE DRIVE		
City HARRISVILLE	State RI	Zip 02830	City CHEPACHET	State RI	Zip 02814
Secretary Name TOM STAPLES			Treasurer Name ROBERT BUCKLEY		
Street Address PO BOX 24			Street Address 579 WEST IRON STONE ROAD		
City MAPLEVILLE	State RI	Zip 02839	City HARRISVILLE	State RI	Zip 02830
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23					
Director Name DENNIS B. KEABLE			Director Name DENIS DESCHAMPS		
Street Address 300 CHAPEL STREET			Street Address 126 BROUILLARD LANE		
City HARRISVILLE	State RI	Zip 02830	City PASCOAG	State RI	Zip 02859
Director Name JAMES MCCORMICK, III			Director Name WAYNE SURPRENANT		
Street Address 40 MAPLE DRIVE			Street Address 705 COOPER HILL ROAD		
City HARRISVILLE	State RI	Zip 02830	City MAPLEVILLE	State RI	Zip 02839
9. REGISTERED AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 641 - R.I.G.L. 7-6-13/7-6-78					

This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

30244

FILED  
JUN 20 2016

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Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

*[Signature]*  
Signature of Officer

6/12/16  
Date

THOMAS V. ROMANO

Print or Type Name of Officer

PRESIDENT

Title of Officer

File Date _____	RY
Check No. _____	
By: _____	
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