RI SOS Filing Number: 201601231840 Date: 07/01/2016 8:30 AM

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. 000642554

2. Name of Corporation Patriot Hockey Association

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 744 MIDDLE ROAD
City or Town: PORTSMOUTH State: RI Zip: 02871 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: PO BOX 171

City or Town: PORTSMOUTH State: RI Zip: 02871 Country: UNI

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

TO ASSIST PORTSMOUTH YOUTH HOCKEY 501C3 STATUS OF THE IRS CODE

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	MICHAL O'BRIEN	134 VALHALLA DR PORTSMOUTH, RI 02871 USA
TREASURER	ALYSON ADKINS	744 MIDDLE RD PORTSMOUTH, RI 02871 USA
SECRETARY	GLENN STEELEY	40 SWEET FARM RD

0-6754-0

		PORTSMOUTH, RI 02871 USA
VICE PRESIDENT	SHERYL FARIA	36 JOSHUA TERR PORTSMOUTH, RI 02871 USA
DIRECTOR	MICHAEL O'BRIEN	134 VALHALLA DR PORTSMOUTH, RI 02871 USA
DIRECTOR	GLENN STEELEY	40 SWEET FARM RD PORTSMOUTH, RI 02871 USA
DIRECTOR	SHERYL FARIA	36 JOSHUA TERR PORTSMOUTH, RI 02871 USA
DIRECTOR	ALYSON ADKINS	744 MIDDLE RD PORTSMOUTH, RI 02871 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

MICHAEL OBRIEN 134 VALHALLA DRIVE PORTSMOUTH , RI 02871

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

Signed this 1 Day of July, 2016 at 8:33:46 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 ALYSON ADKINS
Signature of Authorized Person

Form No. 631
Revised 09/07