



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. 000029498

2. Name of Corporation Warwick Soccer Association

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 162 TROUT BROOK LANE

City or Town: HOPE

State: RI Zip: 02831 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

PROMOTE THE SPORT OF SOCCER THROUGH ORGANIZED LEAGUE PLAY FOR YOUNGSTERS

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	DANNY PEIXINHO	273 PINE STREET WARWICK, RI 02888 USA
SECRETARY	JULIE MIXNER	200 COLE FARM ROAD WARWICK, RI 02889 USA

VICE PRESIDENT	THOMAS FLANDERS	31 HARVARD AVE WARWICK, RI 02889 USA
DIRECTOR	ALISON OLEARY	5 WHIPPOORWILL ROAD WARWICK, RI 02888 USA
DIRECTOR	SHERI COATES	17 HAWKSLEY AVE WARWICK, RI 02889 USA
DIRECTOR	JAMES MIXNER	200 COLE FARM ROAD WARWICK, RI 02889 USA
DIRECTOR	LISA FLANDERS	31 HARVARD AVE WARWICK, RI 02889 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**

JOSEPH MURPHY 162 TROUT BROOK LANE HOPE , RI 02831

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

**Signed this 6 Day of July, 2016 at 4:30:41 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 JOSEPH P MURPHY III  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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