



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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NEW FILED  
SECRETARY OF STATE  
CORPORATIONS DIV

2016 JUL 12 AM 11:15

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

Filing Period: June 1 - June 30 • This report must be typed or printed legibly.

Filing Fee: \$20.00 • FAILURE TO FILE THIS REPORT BY JULY 30 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. <b>55867</b>		2. Exact name of the Corporation <b>Johnston Adult Sports Association</b>			
3. State of Incorporation <b>Rhode Island</b>		4. Brief description of the character of business conducted in Rhode Island <b>The ongoing promotion and funding of sports programs and events.</b>			
5. Principal office address <b>c/o Steven M. Placella, 1304 Atwood Avenue</b>		City <b>Johnston</b>		State <b>RI</b>	Zip <b>02919</b>
6. LIST ALL OFFICERS (NAMES AND ADDRESSES) ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
President Name <b>Daniel E. Mazzulla</b>		Vice-President Name <b>Vincent Jackvony, Jr.</b>			
Street Address <b>7 Luther Street</b>		Street Address <b>30 Harrington Avenue</b>			
City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</b>	City <b>Scituate</b>	State <b>RI</b>	Zip <b>02931</b>
Secretary Name <b>Anthony F. Corsinetti, II</b>		Treasurer Name <b>Edward Bedrosian</b>			
Street Address <b>5 Winika Street</b>		Street Address <b>22 Atwells Avenue</b>			
City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</b>	City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</b>
7. LIST ALL DIRECTORS (NAMES AND ADDRESSES). RHODE ISLAND CORPORATIONS <b>MUST</b> LIST NO LESS THAN THREE (3) DIRECTORS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Director Name <b>Daniel E. Mazzulla</b>		Director Name <b>Edward Bedrosian</b>			
Street Address <b>7 Luther Street</b>		Street Address <b>22 Atwells Avenue</b>			
City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</b>	City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</b>
Director Name <b>Anthony F. Corsinetti, II</b>		Director Name <b>Vincent Jackvony, Jr.</b>			
Street Address <b>5 Winika Street</b>		Street Address <b>30 Harrington Avenue</b>			
City <b>Johnston</b>	State <b>RI</b>	Zip <b>02919</b>	City <b>Scituate</b>	State <b>RI</b>	Zip <b>02831</b>
8. REGISTERED AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 641.					

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

File Date

**FILED**

Check No

**JUL 12 2016**

By:

FOR SECRETARY OF STATE USE ONLY

**1533**

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 of Officer or Authorized Representative

**6/27/2016**

Date

**Daniel E. Mazzulla, President**

Print or Type Name of Officer or Authorized Representative