



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. 000029875

2. Name of Corporation Rhode Island Raccoon Hunters Association, Inc.

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: 391 STONY LANE #17

City or Town: EXETER

State: RI

Zip: 02822

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

A SPORTING CLUB IN EXETER, RHODE ISLAND

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	KEITH LEE	PO BOX 5672 PROVIDENCE, RI 02903 USA
TREASURER	DANNY CALABRO	8 CALDERWOOD AVE GREENVILLE, RI 02828 USA
SECRETARY	THOMAS L CLUPNY	30 BOURNE AVE

		RUMFORD, RI 02916 USA
VICE PRESIDENT	JAMES ARNOLD	8 SAINT VINCENT DEPAUL ST COVENTRY, RI 02816 USA
DIRECTOR	KEITH LEE	PO BOX 5672 PROVIDENCE, RI 02903 USA
DIRECTOR	JAMES ARNOLD	8 SAINT VINCENT DEPAUL ST COVENTRY, RI 02816 USA
DIRECTOR	DANNY CALABRO	8 CALDERWOOD AVE GREENVILLE, RI 02828 USA
DIRECTOR	THOMAS L CLUPNY	30 BOURNE AVE RUMFORD, RI 02916 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**

THOMAS L. CLUPNY 30 BOURNE AVENUE RUMFORD , RI 02916

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

Signed this 18 Day of July, 2016 at 9:33:52 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 KEITH LEE
Signature of Authorized Person

Form No. 631
Revised 09/07

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