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. 000072191

2. Name of Corporation CHARIHO YOUTH SOCCER ASSOCIATION

3. State of Incorporation

State: RI

4. Corporate Address in Rhode Island

No. and Street: PO BOX 1207
City or Town: HOPE VALLEY State: RI Zip: 02832 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

TO PROMOTE, FOSTER, ANDMINISTER, AND PERPETUATE THE GAME OF SOCCER FOR BOYS AND GIRLS UNDER THE AGE OF 19 YEARS OLD IN CHARLESTOWN, RICHMOND, AND HOPKINTON.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
0-4589-0 PRESIDENT	LERAY ERICK RINNE	20 SUSAN DRIVE RICHMOND, RI 02812 USA
TREASURER	SHERRI JACKSON	5 CHERRY LANE

		HOPE VALLEY, RI 02832 USA
SECRETARY	DANIEL ORCIARI	6 ANNA DRIVE HOPE VALLEY, RI 02832 USA
VICE PRESIDENT	MATTHEW DENECOUR	PO BOX 1207 HOPE VALLEY, RI US
DIRECTOR	KAREN GLENWRIGHT	50 RIVERVIEW DRIVE CHARLESTOWN, RI 02813 USA
DIRECTOR	ANTHONY GOMEZ	241 BISCUIT CITY RD CHARLESTOWN, RI 02813 USA
DIRECTOR	JILL OATLEY	BOX 1207 HOPE VALLEY, RI 02832 USA
DIRECTOR	ERIK SODERSTROM	17 DEER TRAIL ASHAWAY, RI 02804 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

MARK T. REYNOLDS 18 BRACKEN HILL COURT CAROLINA , RI 02812

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

Signed this 2 Day of February, 2017 at 5:30:26 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 LERAY E RINNE
Signature of Authorized Person

Form No. 631
Revised 09/07

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