



**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: 2017

1. Corporate ID No. 000083161

2. Name of Corporation Chariho Girls Summer Softball League

3. State of Incorporation

State: RI

ARTICLE III

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of activity in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code

6

713990

4. Corporate Address in Rhode Island

No. and Street: 1027 MAIN ST

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 PROVIDE INSTRUCTIONAL AND RECREATIONAL SOFTBALL FOR GIRLS IN THE TOWNS OF 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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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
PRESIDENT	MICHAEL DIAS	9 HANNAS RD CHARLESTOWN, RI 02813 USA
TREASURER	JEFFREY M WILLIS	73 HOLIDAY CT WAKEFIELD, RI 02879 USA
SECRETARY	CHRISTINA WILLET	11 ROSE CT CHARLESTOWN, RI 02813 USA
VICE PRESIDENT	KEVIN DORGAN	7 THOMAS LN HOPE VALLEY, RI 02832 USA
DIRECTOR	SHARON DIAS	9 HANNAS RD CHARLESTOWN, RI 02813 USA
DIRECTOR	TAMMY GATHEN	140 NEW LONDON TURNPIKE WYOMING, RI 02898 USA
DIRECTOR	CHRISTINE CONKLIN	163 DYE HILL RD HOPE VALLEY, RI 02832 USA
DIRECTOR	TARA DEGIACOMO	14 EDGEWOOD AVE ASHAWAY, RI 02804 USA
DIRECTOR	TIM LILLIGREN	1141 MAIN ST WYOMING, RI 02898 USA
DIRECTOR	KEVIN O'LEARY	32 BURLINGAME DR CHARLESTOWN, RI 02813 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 DIAS 9 HANNAS RD CHARLESTOWN , RI 02813

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

Signed this 7 Day of June, 2017 at 3:22:29 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 JEFFREY M. WILLIS
Signature of Authorized Person

Form No. 631
Revised 09/07