



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2017

Non-Profit Corporation

→ Filing period: June 1 - June 30

→ Filing Fee: \$20.00

→ Penalty: Additional \$25.00 fee if form is not filed by July 30.

RECEIVED
 R.I. DEPT. OF STATE
 BUS SVCS DIV

2017 JUN 16 PM 1:38

1. Entity ID Number 000154900		2. Exact name of the Corporation Narragansett Running Association			
3. State of Incorporation RI		5. Brief description of the character of business conducted in Rhode Island To support the running community and charitable causes by organizing, volunteering and participating in, and donating to, running related events in the South County area.			
4. NAICS Code 813319 - Other Social Advoc					
6. Principal Office Address P.O. Box 3214			City Narragansett	State RI	Zip 02882
7. List ALL officers (names and addresses) Check the box to indicate an attachment ☐					
President Name Michelle San Antonio			Vice-President Name Richard E. Thornton		
Street Address 10 Dovetail Lane			Street Address 135 Ricci Lane		
City Wakefield	State RI	Zip 02879	City North Kingstown	State RI	Zip 02852
Secretary Name Mary D'Arcy			Treasurer Name Daniel Hartnett		
Street Address 658 Rose Hill Road			Street Address 233 Mulberry Drive		
City Wakefield	State RI	Zip 02879	City Wakefield	State RI	Zip 02879
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment ☐					
Director Name Michelle San Antonio			Director Name Richard E. Thornton		
Street Address 10 Dovetail Lane			Street Address 135 Ricci Lane		
City Wakefield	State RI	Zip 02879	City North Kingstown	State RI	Zip 02852
Director Name Mary D'Arcy			Director Name Daniel Hartnett		
Street Address 658 Rose Hill Road			Street Address 233 Mulberry Drive		
City Wakefield	State RI	Zip 02879	City Wakefield	State RI	Zip 02879
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
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.					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>					
Name of Officer/Authorized Representative Richard E. Thornton, Vice-President				Date 06/16/2017	
Signature of Officer/Authorized Representative 					

FILED

JUN 16 2017

