



**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.** 000151539

**2. Name of Corporation** Island Youth Lacrosse

**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

**4. Corporate Address in Rhode Island**

No. and Street: 1100 AQUIDNECK AVENUE  
City or Town: MIDDLETOWN State: RI Zip: 02842 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**

CHARITABLE, RELIGIOUS, EDUCATIONAL AND SCIENTIFIC PURPOSES

**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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	DAVID P MARTLAND	4 COGGESHALL AVENUE NEWPORT, RI 02840 USA
TREASURER	TIMOTHY ROBINSON	PO BOX 4051 MIDDLETOWN, RI 02842 USA
SECRETARY	KIRSTEN KLANIAN	24 SUMMERFIELD LANE MIDDLETOWN, RI 02842 USA
DIRECTOR	KATIE HAMILTON	10 SACHUEST DRIVE MIDDLETOWN, RI 02842 USA
DIRECTOR	MJ BREGENHOJ	60 BURNSIDE AVENUE NEWPORT, RI 02840 USA
DIRECTOR	ANSON STOOKEY	1215 GREEN END AVENUE MIDDLETOWN, RI 02842 USA
DIRECTOR	TIMOTHY ROBINSON	PO BOX 4051 MIDDLETOWN, RI 02842 USA
DIRECTOR	DAVID P. MARTLAND	4 COGGESHALL AVENUE NEWPORT, RI 02840 USA
DIRECTOR	ANDREW DICKINSON	192 PECKHAM AVENUE MIDDLETOWN, RI 02842 USA
DIRECTOR	STEPHEN A. DELEO	208 INDIAN AVENUE MIDDLETOWN, RI 02842 USA
DIRECTOR	MATTHEW T. NUNES	60 ALMY STREET NEWPORT, RI 02840 USA
DIRECTOR	KIRSTEN KLANIAN	24 SUMMERFIELD LANE MIDDLETOWN, RI 02842 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**

CRISTINA M. OFFENBERG, ESQ. 1100 AQUIDNECK AVENUE MIDDLETOWN , RI 02842

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

**Signed this 23 Day of August, 2017 at 1:30:01 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 DAVID P MARTLAND  
Signature of Authorized Person

