



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

Annual Report for the year: 2009  
 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.

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|   |                    |  |                     |
|---|--------------------|--|---------------------|
| 1. Entity ID Number<br><b>000027227</b>   |                    | 2. Exact name of the Corporation<br><b>Johnston National Little League</b>                                   |                     |
| 3. State of Incorporation<br><b>RI</b>  |                    | 5. Brief description of the character of business conducted in Rhode Island<br><b>Johnston Little League</b> |                     |
| 4. NAICS Code<br><b>711211</b>  |                    |  |                     |
| 6. Principal Office Address<br><b>22 Atwells Avenue</b>   |                    | City<br><b>Johnston</b>  | State<br><b>RI</b>  |
|   |                    | City<br><b>Johnston</b>  | Zip<br><b>02919</b> |
| 7. List ALL officers (names and addresses)  |                    | Check the box to indicate an attachment <input type="checkbox"/>   |                     |
| President Name<br><b>Edward Bedrosian</b>   |                    | Vice-President Name<br><b>John Sirao</b>   |                     |
| Street Address<br><b>22 Atwells Avenue</b>  |                    | Street Address<br><b>3 South Street</b>  |                     |
| City<br><b>Johnston</b>   | State<br><b>RI</b> | City<br><b>Johnston</b>  | State<br><b>RI</b>  |
| Zip<br><b>02919</b>   |                    | Zip<br><b>02919</b>  |                     |
| Secretary Name<br><b>Frank Colletta</b>   |                    | Treasurer Name<br><b>Peter Susi</b>  |                     |
| Street Address<br><b>15 Rollingwood Drive</b>   |                    | Street Address<br><b>376 Borden Avenue</b>   |                     |
| City<br><b>Johnston</b>   | State<br><b>RI</b> | City<br><b>Johnston</b>  | State<br><b>RI</b>  |
| Zip<br><b>02919</b>   |                    | Zip<br><b>02919</b>  |                     |
| 8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors   |                    |  |                     |
| Director Name<br><b>See above</b>   |                    | Director Name  |                     |
| Street Address  |                    | Street Address   |                     |
| City  | State              | City   | State               |
| Zip   |                    | Zip  |                     |
| Director Name   |                    | Director Name  |                     |
| Street Address  |                    | Street Address   |                     |
| City  | State              | City   | State               |
| Zip   |                    | Zip  |                     |
| 9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.   |                    |  |                     |
| <b>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.</b> |                    |  |                     |
| This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly authorized representative, Receiver or Trustee  |                    |  |                     |
| Name of Officer/Authorized Representative<br><b>Robert D. Giudici</b>   |                    | Date<br><b>6/14/2017</b>   |                     |
| Signature of Officer/Authorized Representative<br><i>Robert D. Giudici</i>  |                    | <b>FILED</b><br><b>OCT 25 2017</b>   |                     |
|   |                    | <b>BY CA 315768 1:34</b>   |                     |