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. 000030373

2. Name of Corporation PORTSMOUTH-PATRIOTS YOUTH FOOTBALL ASSOCIATION

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

624110

4. Corporate Address in Rhode Island

No. and Street: P.O. BOX 793
City or Town: PORTSMOUTH State: RI Zip: 02871 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

YOUTH FOOTBALL ORGANIZATION.

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete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	JOHN HURD	48 KERR ROAD PORTSMOUTH, RI 02871 USA
TREASURER	ANDRE KHALFAYAN	196 KING CHARLES DR PORTSMOUTH, RI 02871 USA
SECRETARY	TARA MELLO	60 SWEET FARM ROAD PORTMSOUTH, RI 02871 USA
VICE PRESIDENT	THOMAS ROCCO	14 HAMMEL COURT PORTSMOUTH, RI 02871 USA
DIRECTOR	JULIE SWEENEY	11 EASTON AVENUE PORTSMOUTH, RI 02871 USA
DIRECTOR	JENNIFER CONHEENY	67 LAMBIE CIRCLE PORTSMOUTH, RI 02871 USA
DIRECTOR	CARLENE MOHR	32 SUNSET AVE PORTSMOUTH, RI 02871 USA
DIRECTOR	MATT CORREIA	36 CLEARVIEW AVE PORTSMOUTH, RI 02871 USA
DIRECTOR	RYAN MONIZ	11 BAY ST JAMESTOWN, RI 02835 USA
DIRECTOR	CHRISTOPHER BICHO	96 DIANNE AVE PORTSMOUTH, RI 02871 USA
DIRECTOR	TARA THOMAS	200 HILLTOP DRIVE PORTSMOUTH , RI 02871 USA
DIRECTOR	BEN HURD	33 LOWELL DR PORTSMOUTH, RI 02871 USA
DIRECTOR	JILL WATSON	57 RAYMOND DR PORTSMOUTH, RI 02871 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

ERIC P. CHAPPELL, ESQ. 171 CHASE ROAD P.O. BOX 8 PORTSMOUTH , RI 02871

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 February, 2018 at 2:36:24 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 ANDRE KHALFAYAN
Signature of Authorized Person

Form No. 631
Revised 09/07