RI SOS Filing Number: 201864727070 Date: 5/11/2018 11:01:00 AM



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

RECEIVED SECRETARY OF STATE CORPORATIONS DIV

Annual Report for the year: Non-Profit Corporation

2018

2018 MAY 11 AM 10: 59

-> Filing period June 1 - June 30

→ Filing Fee: \$20.00

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

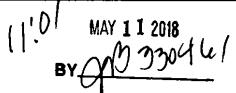
Entity ID Number	2. Exact name of the Corporation				
000158874	East Greenwich Lacrosse Association				
3. State of Incorporation	Brief description of the character of business conducted in Rhode Island				
RI	To organize and promote the sport of lacrosse among the youth in Rhode Island and the Town of East Greenwich.				
4. NAICS Code					
711310					
. Principal Office Address			City	State	Zip
5586 Post Rd. Suite 202			East Greenwich	RI	02818
7 List ALL officers (names and addresses) Check the box to indicate an attachment					
President Name Rene Lopez			Vice-President Name		
Street Address 35 Fox Run Drive			Street Address		
City East Greenwich	State RI	Zip 02818	City	State	Zip
Secretary Name			Treasurer Name Edmond Loiselle		
Street Address			Street Address 15 Boesch Farm Rd.		
City	State	Zip	City East Greenwich	State RI	Zip 02818
8. List ALL directors (names and addresses). RI Corporations MUST list at least THREE directors. Check the box to indicate an attachment					
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zıp
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.					
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 Educad Loiselle				Date 5 - 10 - 18	
Signature of Office Authorized Representative SIGN DOCUMENT HERE FILED					

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov



FORM 631 - Revised: 11/2017

President:

Rene Lopez 35 Fox Run Dr. East Greenwich RI 02818

Treasurer:

Ed Loiselle 15 Boesch Farm Rd. East Greenwich RI 02818

Directors:

Gwyn Andrews 1846 Frenchtown Road East Greenwich RI 02818

Lisa Birkett 60 Deerfield Dr. East Greenwich RI 02818

Don Dunwoody 2080 Frenchtown Rd. East Greenwich RI 02818

Dave Haddeland 133 Crestwood Rd Warwick RI 02886

Jack Hayes 15 Red Oak Rd. East Greenwich RI 02818

Jeff Jordan 100 River Farm Dr East Greenwich RI 02818

Joe Madden 7 Ashbrook Run East Greenwich RI 02818

PT Navarro 25 River Run East Greenwich RI 02818 David O'Neil 316 Longmeadow Ave Warwick RI 02886

Craig Picard 150 Woodbridge Dr. East Greenwich RI 02818

Chad Stone 16 Somerset St East Greenwich RI 02818

Kelly Swanson 40 Summit Farm Dr East Greenwich RI 02818

Dennis Votta 25 Hamilton Dr. East Greenwich RI 02818

Jerad Zimmer 131 Stoney Acre Dr. Cranston RI 02920