



**NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005**

Filing Period: June 1 - June 30 • Filing Fee: \$20.00  
(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 131709		2. Name of Corporation Corvette Cruisers			
3. State of Incorporation RHODE ISLAND		4. Corporate address in Rhode Island - Street Address c/o Paul Harrington 54 Cole Drive		City N Kingstown	Zip 02852
5. Foreign corporation. Enter principal office address			City	State	Zip
6. Brief Description of the character of the affairs which are actually conducted in Rhode Island TO OPERATE A 50/50 RAFFLE AS PART OF CLASSIC CAR CRUISE NIGHTS PROCEEDS DISTRIBUTED TO VARIOUS CHARITIES					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Paul Harrington			Vice President Name Mary bou Greco		
Street Address 54 Cole Drive			Street Address 194 Selma Street		
City N Kingstown	State RI	Zip 02852	City Cranston	State RI	Zip 02920
Secretary Name Mary Lou Greco			Treasurer Name Paul Harrington		
Street Address 194 Selma Street			Street Address 54 Cole Drive		
City Cranston	State RI	Zip 02920	City N Kingstown	State RI	Zip 02852
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS THE NUMBER OF DIRECTORS OF A DOMESTIC (RHODE ISLAND) CORPORATION SHALL NOT BE LESS THAN THREE (3). R.I.G.L. 7-6-23					
Director Name Peter Sacchetti			Director Name Paul Harrington		
Street Address 165 Grandview Dr			Street Address 54 Cole Drive		
City Warwick	State RI	Zip 02886	City N Kingstown	State RI	Zip 02852
Director Name Mary Lou Greco			Director Name		
Street Address 194 Selma St			Street Address		
City Cranston	State RI	Zip 02920	City	State	Zip
9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78					
Agent Name PAUL T. HARRINGTON			Address		
Address 54 COLE DRIVE			City NORTH KINGSTOWN	Zip 02852	

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



131709

File Date	7-5-05
Check No.	132
By:	
FOR SECRETARY OF STATE USE ONLY	

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.

6/17/05  
Signature of Officer Date

Paul T Harrington Pres  
Print or Type Name of Officer

Title of Officer



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President Name Paul Harrington			Vice President Name Mary Lou Greco		
Street Address 54 Cole Drive			Street Address 194 Selma Street		
City North Kingstown	State RI	Zip 02852	City Cranston	State RI	Zip 02920
Secretary Name Mary Lou Greco			Treasurer Name Paul Harrington		
Street Address 194 Selma Street			Street Address 54 Cole Drive		
City Cranston	State RI	Zip 02920	City North Kingstown	State RI	Zip 02852
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Director Name Mary Lou Greco			Director Name Paul Harrington		
Street Address 194 Selma St			Street Address 54 Cole Dr		
City Cranston	State RI	Zip 02920	City N Kingstown	State RI	Zip 02852
Director Name Rita Ricci			Director Name		
Street Address 245 Log Rd			Street Address		
City Harrisville	State RI	Zip 02830	City	State	Zip
9. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78					
Agent Name PAUL T. HARRINGTON			Address		
Address 54 COLE DRIVE			City NORTH KINGSTOWN	Zip 02852	

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



\* 1 3 1 7 0 9 \*

File Date 7/7/04  
Check No. 114  
By: PA  
FOR SECRETARY OF STATE USE ONLY

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.

Paul Harrington 6/22/04  
Signature of Officer Date  
Paul Harrington  
Print or Type Name of Officer  
Director / President  
Title of Officer