



**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:** 2018

**1. Corporate ID No.** 000109008

**2. Name of Corporation** THE XPRESS 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

813319

**4. Corporate Address in Rhode Island**

No. and Street: 521 S MAIN ST

City or Town: WOONSOCKET

State: RI

Zip: 02895

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**

SUPPORT AND CONDUCTING BUSINESS OF A NON PROFIT YOUTH FOOTBALL AND LEADING PROGRAM

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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**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

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
PRESIDENT	JASON MIRANDA	10 LYONS COURT MILLVILLE, MA 01529 USA
TREASURER	MICHAEL MANZI	594 PROVIDENCE PIKE NORTH SMITHFIELD, RI 02896 USA
VICE PRESIDENT	MARYBETH HAYNES	8 LENLOR LANE MILLVILLE, MA 01529 USA
DIRECTOR	KELLEY MUNGER	135 DULUDE AVE WOONSOCKET, RI 02895 USA
DIRECTOR	COLIN CARUFEL	1456 POUND HILL ROAD NORTH SMITHFIELD, RI 02896 USA
DIRECTOR	CHARLES BOUDREAU	2235 PROVIDENCE PIKE NORTH SMITHFIELD, RI 02897 USA
DIRECTOR	JOSHUA POZNANSKI	103 CENTRAL STREET MILLVILLE, MA 01529 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**

MICHAEL MANZI 521 SOUTH MAIN STREET WOONSOCKET , RI 02895

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

**Signed this 15 Day of June, 2018 at 8:32:07 AM 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 MICHAEL MANZI  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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