



**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.** 000027595

**2. Name of Corporation** The Boys Clubs and Girls Clubs of Newport County, Inc.

**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

**4. Corporate Address in Rhode Island**

No. and Street: 95 CHURCH STREET  
City or Town: NEWPORT State: RI Zip: 02840 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 DEVELOPMENT 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 If officers and/or directors have been elected, the title Incorporator is no longer applicable; please delete**

<b>Title</b>	<b>Individual Name</b> First, Middle, Last, Suffix	<b>Address</b> Address, City or Town, State, Zip Code, Country
CEO	JOSEPH P. PRATT	2 ROSE STREET NEWPORT, RI 02840 USA
DIRECTOR	FRANK NEWSOME	65 BURNSIDE NEWPORT, RI 02840 USA
DIRECTOR	PAMELA FORD	MIRAMAR 646 BELLEVUE AVENUE NEWPORT, RI 02840 USA
VICE PRESIDENT	PAUL LEYS	57 RUGGLES AVENUE NEWPORT, RI 02840 USA
SECRETARY	STACIE MILLS	19 HARRISON AVENUE NEWPORT, RI 02840 USA
SECRETARY	MARK HORAN	15 BERKELEY AVENUE NEWPORT, RI 02840 USA
DIRECTOR	PATTI RAKOLTA	17 LEROY AVENUE NEWPORT, RI 02840 USA
PRESIDENT	KRISTIN EGAN REED	337 BELLEVUE AVENUE NEWPORT, RI 02840 USA
DIRECTOR	PETER C HATFIELD	39 MILL STREET NEWPORT, RI 02840 USA
DIRECTOR	JENNIFER VIOLETTE	22 ANN AVENUE PORTSMOUTH, RI 02871 USA
DIRECTOR	SPENCER CORDISEN MCCOMBE	7 THURSTON AVENUE NEWPORT, RI 02840 USA
DIRECTOR	THOMAS EBERHARDT	4 DURHAM STREET, UNIT 4 BOSTON, MA 02115 USA
DIRECTOR	ELI DANA	7 MARSH STREET NEWPORT, RI 02840 USA
DIRECTOR	SHARON CAMERON LAWN	107 BELLEVUE AVENUE UNIT #2 NEWPORT, RI 02840 USA
TREASURER	JEREMIAH SHAFIR	2840 VALENCIA WAY FORT MYERS, FL 33901 USA
DIRECTOR	LORRIE TAYLOR BURNS	25 COTTONTAIL DRIVE PORTSMOUTH, RI 02871 USA
DIRECTOR	ALLEN CORCORAN	108 COREY LANE MIDDLETOWN, RI 02842 USA
DIRECTOR	JON DUFFY	33 ALFRED DROWN RD BARRINGTON, RI 02806 USA
DIRECTOR	CARLO ROSSELL	59 PEPPER LANE NEW CANAAN, CT 06840 USA
DIRECTOR	FRANK FLANAGAN	300 COMPTON VIEW MIDDLETOWN, RI 02842 USA
DIRECTOR	SHERRI GRACE	3 GRACEWOOD COURT OYSTER BAY, NY 11771 USA
DIRECTOR	KIM HERRLINGER	590 BELLEVUE AVENUE NEWPORT, RI 02840 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**

JOSEPH P. PRATT 95 CHURCH STREET NEWPORT , RI 02840

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

**Signed this 18 Day of June, 2018 at 11:34:09 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 JOSEPH P. PRATT  
Signature of Authorized Person

Form No. 631  
Revised 09/07

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