



State of Rhode Island and Providence Plantations  
Department of State - Business Services Division

Annual Report for the year: **2018**

Non-Profit Corporation

→ Filing period: June 1 - June 30

→ Filing Fee: \$20.00

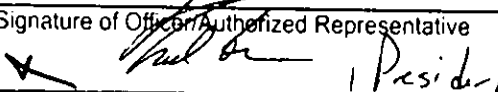
→ Penalty: Additional \$25.00 fee if form is not filed by July 30.

**FILED**

JUL 02 2018

BY

2816

1. Entity ID Number <b>31239</b>		2. Exact name of the Corporation <b>CUMBERLAND BEAGLE CLUB</b>			
3. State of Incorporation <b>R.I.</b>		5. Brief description of the character of business conducted in Rhode Island <b>SPORTSMAN'S ASSOCIATION, HUNTING, FISHING, CONSERVATION, FIREARM SAFETY EDUCATION AND TRAINING ON A NOT FOR PROFIT BASIS</b>			
4. NAICS Code <b>813312 - Environment, Cons.</b>					
6. Principal Office Address <b>1495 NEWPORT AVE.</b>		City <b>PAWTUCKET</b>		State <b>R.I.</b>	Zip <b>02861</b>
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name <b>FRED R. LERMER</b>		Vice-President Name <b>FRANCIS J. SOUZA</b>			
Street Address <b>2970 MENDON RD. #122</b>		Street Address <b>1775 DIAMOND HILL RD.</b>			
City <b>CUMBERLAND</b>	State <b>R.I.</b>	Zip <b>02864</b>	City <b>CUMBERLAND</b>	State <b>R.I.</b>	Zip <b>02864</b>
Secretary Name <b>PAMELA COLETTA</b>		Treasurer Name <b>FRED R. LERMER</b>			
Street Address <b>7 EVERBLOOM DR.</b>		Street Address <b>2970 MENDON RD. #122</b>			
City <b>JOHNSTON</b>	State <b>R.I.</b>	Zip <b>02919</b>	City <b>CUMBERLAND</b>	State <b>R.I.</b>	Zip <b>02864</b>
8. List ALL directors (names and addresses). RI Corporations <b>MUST</b> list at least <b>THREE</b> directors. <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name <b>EDWARD F. NAWROCKI</b>		Director Name <b>FRANCIS L. KING</b>			
Street Address <b>129 MOUNT PLEASANT VIEW DR.</b>		Street Address <b>195 QUAKER LANE</b>			
City <b>CUMBERLAND</b>	State <b>R.I.</b>	Zip <b>02864</b>	City <b>N. SCITUATE</b>	State <b>R.I.</b>	Zip <b>02857</b>
Director Name <b>JOHN JANCZAR</b>		Director Name			
Street Address <b>400 WEST WRENTHAM RD.</b>		Street Address			
City <b>CUMBERLAND</b>	State <b>R.I.</b>	Zip <b>02864</b>	City	State	Zip
9. Registered Agent in Rhode Island. This information is currently of record in the Department of State. Changes require filing Form 641.					
<b>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.</b>					
<i>This report must be signed by either the President, Vice-President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver or Trustee.</i>					
Name of Officer/Authorized Representative <b>FRED R. LERMER, PRESIDENT</b>				Date <b>6/27/18</b>	
Signature of Officer/Authorized Representative  <b>President</b>				SIGN DOCUMENT HERE	

MAIL TO:  
Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040