STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

***Matthew A. Brown**, Secretary of State*
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

NON-PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: June 1 - June 30 • Filing Fee: $20.00 *

**** 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.***

1. Corporate ID No.	2. Name of Corporation		
142913	RHODE ISLAND SPORTS HEROES		
3. State of Incorporation	4. Corporate address in Rhode Island - Street Address	City	Zip
RI	P.O. Box 1304	COVENTRY	02816
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 PROVIDE UNDER-PRIVILEGED YOUTHS, AGES 19 AND UNDER, THE OPPORTUNITY TO ATTEND LIVE SPORTING EVENTS.

7. NAMES AND ADDRESSES OF THE OFFICERS: (*"X" BOX FOR ATTACHMENT*) ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name	Vice President Name
LOUIS TAGER JR.	JAMES ORENBERG
Street Address: P.O. Box 1304	Street Address: P.O. Box 1304
City: COVENTRY State: RI Zip: 02816	City: COVENTRY State: RI Zip: 02816
Secretary Name	**Treasurer Name**
CHRISTOPHER RICCIARDELLI	DAVID R. COSTA
Street Address: P.O. Box 1304	Street Address: P.O. Box 1304
City: COVENTRY State: RI Zip: 02816	City: COVENTRY State: RI Zip: 02816

8. NAMES AND ADDRESSES OF THE DIRECTORS: (*"X" BOX FOR ATTACHMENT*) ☐ **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	Director Name
LOUIS TAGER JR	JAMES ORENBERG
Street Address: P.O. Box 1304	Street Address: P.O. Box 1304
City: COVENTRY State: RI Zip: 02816	City: COVENTRY State: RI Zip: 02816
Director Name	**Director Name**
CHRISTOPHER RICCIARDELLI	CHIP RAPECIS
Street Address: P.O. Box 1304	Street Address: P.O. Box 1304
City: COVENTRY State: RI Zip: 02816	City: COVENTRY State: RI Zip: 02816

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	Address		
Address	City	Zip	

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

[redacted] [redacted]

FILED
File Date: APR 17 2006
Check No.: By 1016
By: Costa
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.

[redacted] 4/13/06
Signature of Officer *Date*

DAVID R. COSTA
Print or Type Name of Officer

[redacted] TREASURER
Title of Officer

Form 631 Rev. 12/05